

15 Dec 00

All Potential Offerors:

Although this solicitation is available for on-line review and download, the Government will not accept hard (paper) copy proposals from offerors. The Government will **only accept** electronic proposals as specified in Section L, paragraph L.7.1.1.

If you choose to offer on this solicitation, the electronic files required for your offer will be emailed to you upon request. Please contact the following individuals, via email, for copies of those files:

kerobinson@us.med.navy.mil

sovercash@us.med.navy.mil

wlgaybill@us.med.navy.mil

The Government prefers requests for these files via email but will honor telefax or written requests. The offeror is ultimately responsible for the accuracy of an email address. Please include the company's complete business name, address, point of contact and telephone number within your email so that you may be contacted if a transmission problem occurs. One email request will be honored per requesting organization.

If you have not received these files within 72 hours of your email request (weekends considered), call the individual listed in the on-line solicitation, Section L, Paragraph L.9.

Once these files are sent to you, you must provide a response to the Government's email, within 48 hours (weekends considered) via you email only, stating that you have successfully RECEIVED AND REVIEWED the files and that they are readable and usable. Your lack of an email response or your failure to categorically state, "I/We have received and reviewed the electronic files and they are readable and usable" may preclude your receipt of subsequent copies of amendments to the solicitation. These amendments, if issued, may cause your proposal content to change, may clarify solicitation language and/or may accelerate or delay required submission dates.

Once you have acknowledged receipt of the electronic files, any/all amendments to the solicitation will also be emailed to you.

Changes to email addresses should be sent to the email address above. However, do not send offeror's questions regarding the language, Government's intent, or clarification to the email address above. This address is a clearinghouse for sending electronic files only and **will not** respond to offeror's questions. Offeror's questions should be addressed the individual listed in the on-line solicitation, Section L, paragraph L.9.

SHIRLEY OVERCASH
Contracting Officer

INFORMATION TO OFFERORS OR QUOTERS SECTION A - COVER SHEET		1. SOLICITATION NUMBER <div style="text-align: center;">N62645-00-R-0017</div>		2. (X one) <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 20px;"></td> <td>a. SEALED BID</td> </tr> <tr> <td style="text-align: center;">X</td> <td>b. NEGOTIATED (RFP)</td> </tr> <tr> <td></td> <td>c. NEGOTIATED (RFQ)</td> </tr> </table>			a. SEALED BID	X	b. NEGOTIATED (RFP)		c. NEGOTIATED (RFQ)
	a. SEALED BID										
X	b. NEGOTIATED (RFP)										
	c. NEGOTIATED (RFQ)										

INSTRUCTIONS

NOTE THE AFFIRMATIVE ACTION REQUIREMENT OF THE EQUAL OPPORTUNITY CLAUSE WHICH MAY APPLY TO THE CONTRACT RESULTING FROM THIS SOLICITATION.

You are cautioned to note the "Certification of Non-Segregated Facilities" in the solicitation. Failure to agree to the certification will render your reply nonresponsive to the terms of solicitations involving awards of contracts exceeding \$25,000 which are not exempt from the provisions of the Equal Opportunity clause.

"Fill-ins" are provided on the face and reverse of Standard Form 18 and Parts I and IV of Standard Form 33, or other solicitation documents and Sections of Table of Contents in this solicitation and should be examined for applicability.

See the provision of this solicitation entitled either "Late Bids, Modifications of Bids or Withdrawal of Bids" or "Late Proposals, Modifications of Proposals and Withdrawals of Proposals."

When submitting your reply, the envelope used must be plainly marked with the Solicitation Number, as shown above and the date and local time set forth for bid opening or receipt of proposals in the solicitation document.

If NO RESPONSE is to be submitted, detach this sheet from the solicitation, complete the information requested on reverse, fold, affix postage, and mail. NO ENVELOPE IS NECESSARY.

Replies must set forth full, accurate, and complete information as required by this solicitation (*including attachments*). The penalty for making false statements is prescribed in 18 U.S.C. 1001.

3. ISSUING OFFICE (*Complete mailing address, including ZIP Code*)
 NAVAL MEDICAL LOGISTICS COMMAND
 ATTN: CODE 02, KATHY ROBINSON
 1681 NELSON STREET
 FORT DETRICK, MD 21702-9203

4. ITEMS TO BE PURCHASED (*Brief description*)
 MULTI-DISCIPLINARY MEDICAL HEALTH CARE WORKERS FOR THE WASHINGTON, DC METROPOLITAN AREA.

5. PROCUREMENT INFORMATION (*X and complete as applicable*)

	a. THIS PROCUREMENT IS UNRESTRICTED			
X	b. THIS PROCUREMENT IS A <u>100</u> % SET-ASIDE FOR ONE OF THE FOLLOWING (<i>X one</i>). (<i>See Section I of the Table of Contents in this solicitation for details of the set-aside.</i>)			
X	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 33%; text-align: center;">(1) Small Business</td> <td style="width: 33%; text-align: center;">(2) Labor Surplus Area Concerns</td> <td style="width: 33%; text-align: center;">(3) Combined Small Business/Labor Area Concerns</td> </tr> </table>	(1) Small Business	(2) Labor Surplus Area Concerns	(3) Combined Small Business/Labor Area Concerns
(1) Small Business	(2) Labor Surplus Area Concerns	(3) Combined Small Business/Labor Area Concerns		

6. ADDITIONAL INFORMATION
 MULTIPLE AWARD: NMLC intends to award multiple indefinite delivery, indefinite quantity personal services contracts resulting from this solicitation.

 Offerors must proposed prices for CLINs in Lots 1 through 3.

 See Section L.11. for pre-proposal conference.

 NOTE: Before submitting a proposal in response to this solicitation, a prospective offeror is encouraged to investigate the potential tax consequences should they elect to perform the resulting contract by using subcontractors in lieu of individuals carried on their payrolls. Under this RFP, the Navy does not dictate whether the individual health care workers provided would be classified by the successful offeror as "independent contractor" or "employees" for federal tax purposes. This determination shall be made solely by the offeror. SEE ALSO SECTION I.6 LIMITATIONS ON SUBCONTRACTING (FAR 52.219-14). If subsequent to award, the successful offeror's determination is challenged, this shall be a matter to be resolved between the offeror and the Internal Revenue Service (IRS). The Navy will not consider favorably any request for equitable adjustment to the contract based upon the successful offeror's receipt of an adverse decision by the IRS.

NOTE: Please see cover letter for further instructions on the requirement for electronic proposal submission.

7. POINT OF CONTACT FOR INFORMATION

a. NAME (<i>Last, First, Middle Initial</i>) ROBINSON, KATHY E.	b. ADDRESS (<i>Include Zip Code</i>) NAVAL MEDICAL LOGISTICS COMMAND ATTN: CODE 02, KATHY ROBINSON 1681 NELSON ST., FT. DETRICK, MD 21702-9203
c. TELEPHONE NUMBER (<i>Include Area Code and Extension</i>) (NO COLLECT CALLS) 301-619-3020	

SOLICITATION, OFFER AND AWARD		1. THIS CONTRACT IS A RATED ORDER UNDER DPAS (15 CFR 350)		RATING		PAGE OF 1 104 PAGES	
2. CONTRACT NO.		3. SOLICITATION NO. N62645-00-R-0017		4. TYPE OF SOLICITATION <input type="checkbox"/> SEALED BID (IFB) <input checked="" type="checkbox"/> NEGOTIATED (RFP)		5. DATE ISSUED 12/15/00	
6. REQUISITION/PURCHASE NO.		7. ISSUED BY NAVAL MEDICAL LOGISTICS COMMAND ATTN: CODE 02 KATHY ROBINSON 1681 NELSON STREET FORT DETRICK, MD 21702-9203					
8. ADDRESS OFFER TO (If other than Item 7)		CODE N62645					

NOTE: In sealed bid solicitations "offer" and "offeror" mean "bid" and "bidder".

SOLICITATION

9. Sealed offers in original and See L copies for furnishing the supplies or services in the Schedule will be received at the place specified in Item 8, or if handcarried, in the depository located in 1681 NELSON STREET, FT DETRICK, MD until 2:00P local time 01/19/01
(Hour) (Date)

CAUTION - LATE Submissions, Modifications, and Withdrawals: See Section L, Provision No. 52.214-7 or 52.215-10. All offers are subject to all terms and conditions contained in this solicitation.

10. FOR INFORMATION CALL:		A. NAME KATHY E. ROBINSON	B. TELEPHONE NO. (Include area code) (NO COLLECT CALLS) 301-619-3020
---------------------------	--	-------------------------------------	--

11. TABLE OF CONTENTS

(✓)	SEC.	DESCRIPTION	PAGE(S)	(✓)	SEC.	DESCRIPTION	PAGE(S)
PART I - THE SCHEDULE				PART II - CONTRACT CLAUSES			
X	A	SOLICITATION/CONTRACT FORM	1	X	I	CONTRACT CLAUSES	83
X	B	SUPPLIES OR SERVICES AND PRICES/COSTS	2	PART III - LIST OF DOCUMENTS, EXHIBITS AND OTHER ATTACH.			
X	C	DESCRIPTION/SPECS./WORK STATEMENT	13	X	J	LIST OF ATTACHMENTS	88
	D	PACKAGING AND MARKING	72	PART IV - REPRESENTATIONS AND INSTRUCTIONS			
X	E	INSPECTION AND ACCEPTANCE	73	X	K	REPRESENTATIONS, CERTIFICATIONS AND OTHER STATEMENTS OF OFFERORS	89
X	F	DELIVERIES OR PERFORMANCE	74	X	L	INSTRS., CONDS., AND NOTICES TO OFFERORS	98
X	G	CONTRACT ADMINISTRATION DATA	76	X	M	EVALUATION FACTORS FOR AWARD	104
X	H	SPECIAL CONTRACT REQUIREMENTS	77				

OFFER (Must be fully completed by offeror)

NOTE: Item 12 does not apply if the solicitation includes the provisions at 52.214-16, Minimum Bid Acceptance Period.

12. In compliance with the above, the undersigned agrees, if this offer is accepted within 120 calendar days (60 calendar days unless a different period is inserted by the offeror) from the date for receipt of offers specified above, to furnish any or all items upon which prices are offered at the price set opposite each item, delivered at the designated point(s), within the time specified in the schedule.

13. DISCOUNT FOR PROMPT PAYMENT (See Section I, Clause No. 52-232-8)		10 CALENDAR DAYS %	20 CALENDAR DAYS %	30 CALENDAR DAYS %	CALENDAR DAYS %
14. ACKNOWLEDGMENT OF AMENDMENTS (The offeror acknowledges receipt of amendments to the SOLICITATION for offerors and related documents numbered and dated:		AMENDMENT NO.	DATE	AMENDMENT NO.	DATE
15A. NAME AND ADDRESS OF OFFEROR		CODE	FACILITY	16. NAME AND TITLE OF PERSON AUTHORIZED TO SIGN OFFER (Type or print)	
15B. TELEPHONE NO. (Include area code)		15C. CHECK IF REMITTANCE ADDRESS IS DIFFERENT FROM ABOVE - ENTER SUCH ADDRESS IN SCHEDULE.		17. SIGNATURE	18. OFFER DATE

AWARD (To be completed by Government)

19. ACCEPTED AS TO ITEMS NUMBERED		20. AMOUNT		21. ACCOUNTING AND APPROPRIATION	
22. AUTHORITY FOR USING OTHER THAN FULL AND OPEN COMPETITION: <input type="checkbox"/> 10 U.S.C. 2304(c) () <input type="checkbox"/> 41 U.S.C. 253(c) ()		23. SUBMIT INVOICES TO ADDRESS SHOWN IN ITEM (4 copies unless otherwise specified)			
24. ADMINISTERED BY (If other than Item 7) CODE		25. PAYMENT WILL BE MADE BY CODE			
26. NAME OF CONTRACTING OFFICER (Type or print)		27. UNITED STATES OF AMERICA (Signature of Contracting Officer)		28. AWARD DATE	

IMPORTANT - Award will be made on this Form, or on Standard Form 26, or by other authorized official written notice.

PART I - THE SCHEDULE

SECTION B - SUPPLIES OR SERVICES AND PRICES/COSTS

B.1. The Contractor shall furnish qualified Health Care Workers in accordance with Section C (Statement of Work), individual Task Orders for these services, and all other terms and conditions set forth herein. Government requirements for contracted health care personnel shall be filled in response to Task Orders issued by the Government against this contract.

B.2. This solicitation is intended to result in multiple indefinite-delivery / indefinite-quantity (IDIQ) contract awards, as identified under FAR 16.504. Task Orders will be priced on a firm fixed price basis.

B.3. The following activity is solely authorized to issue Task Orders:

Naval Medical Logistics Command
Code 02
1681 Nelson Street
Fort Detrick MD 21702-9203

B.4. Task Orders will be placed through the use of a DD Form 1155 signed by the Contracting Officer. Task Orders will be executed in writing by the Contracting Officer and transmitted either via mail, facsimile or electronically via e-mail. If the order is transmitted via e-mail, the contractor shall acknowledge receipt of e-mail.

(a) Performance of health care workers services at other DoD or US Coast Guard facilities who have been granted authority under 10 U.S.C 1091 in the Washington Metropolitan area are contemplated by this contract and shall be considered within the scope of this contract.

(b) In the event that performance at other DoD or US Coast Guard facilities differs slightly from that expressed in Section C, those differences shall be expressed in a site-specific statement of work that will be incorporated as an attachment to the contract. The Washington Metropolitan area is defined as follows: District of Columbia; counties of Anne Arundel, Calvert, Charles, Frederick, Montgomery, Prince George's, and St. Mary's in Maryland; counties of Alexandria, Arlington, Fairfax, Falls Church, Fauquier, King George, Loudon, Prince William, and Stafford in Virginia. Services may also be required at the Philadelphia Naval Business Center, Branch Medical Clinic, Philadelphia, PA.

B.5. Each Task Order will contain at a minimum the following information:

- a) The date of order
- b) Contract number and order number
- c) Description of services (labor category, position qualifications, place of performance, hours of operation, and quantity required)
- d) The unit price
- e) The period of performance
- f) Accounting and appropriation data
- g) Payment office address
- h) Any other pertinent data
- i) Name of Contracting Officer's Representative (COR)

B. 6. Services may be required at any of the locations listed below or any county listed in Section B, Paragraph 4 (each Task Order shall specify the place of performance):

Naval Sites:

Naval Medical Clinic
250 Wood Road
Annapolis, MD 21402-5050

National Naval Medical Center
8901 Wisconsin Avenue
Bethesda, MD 20889-5600

Naval Medical Clinic
47149 Buse Road
Patuxent River, MD 20670-1540

Philadelphia Naval Business Center
Branch Medical Center
Building 615, 1st Floor
Philadelphia, PA 19112

Naval Medical Clinic
2200 Lester Street
Quantico, VA 22134-6050

Air Force Sites:

11th Medical Group
238 Brookley Avenue
Bolling Air Force Base, DC 20332

Malcolm Grow Medical Center
Andrews Air Force Base
Washington, DC 20331-6600

Army Sites:

DeWitt Army Community Hospital
Army Health Clinic Primus
Fairfax, VA 22031

DeWitt Army Community Hospital
Fort Belvoir, VA 22060-5000

Kimbrough Army Community Center
Fort Meade, MD 20755

Andrew Radar Army Health Clinic
Fort Myer, VA 22211

DiLorenzo TRICARE Health Clinic
The Pentagon
Washington, DC

Walter Reed Army Medical Center
6825 16th Street, N.W.
Washington, D.C. 20307-5000

Dewitt Army Community Hospital
Army Health Clinic Primus
Woodbridge, VA 22191

B.7. Minimum and Maximum Quantities

(a) Contract Minimum and Maximum quantities are identified in Section B.11. The Government intends to make three awards from this solicitation. A portion of the contract minimum requirements (at least one Lot) will be awarded to each contract awardee via Task Orders issued concurrently with award of the basic contracts. The Contracting Officer will select and award at least one Lot from those listed in section B.11. (Lots 1 through 3) to each awardee. Initial Task Orders will contain, in the aggregate, all services identified as the Government's minimum quantity.

NOTE 1: The procedures for preparation of the initial Task Order proposal and the evaluation procedures to be employed for award of these initial Task Orders are contained in Section L of this solicitation. The position specific Statements of Work for these positions are contained in Attachments I through III, as indicated below.

NOTE 2: Instructions and procedures for subsequent Task Order preparation and award are contained in Section H of this solicitation.

(b) **CONTRACTED SERVICES.** The positions for which the Government anticipates the need for contract services are listed below. Those positions identified as part of the contractual minimum requirement are specifically identified at B.11 below, as are the attachments containing their specific requirements. Positions subject to Service Contract Act Wage Determinations are indicated with an asterisk.

HEALTH CARE WORKER POSITIONS

Physician Assistant
Family Nurse Practitioner
*Registered Nurse III
*Licensed Practical Nurse I, II or III
*Medical Assistant
Psychiatric Technician
Dietician
Nurse Practitioner (NP)
NP Anesthetist
NP Family
NP Midwife
NP Pediatrics
NP Women's Health
Occupational Therapist
Optometrist
Physical Therapist
Podiatrist
Speech Pathologist
Critical Care Unit (CCU) RN
Intensive Care Unit (ICU) RN
Neonatal Intensive Care Unit (NICU) RN
Pediatric Acute Care Unit RN
Pediatric Intensive Care Unit (PICU) RN
Step-Down RN
Telemetry RN
Medical/Surgical RNs
Oncology RN
Psychiatric (Inpatient) RN
Labor & Delivery RN
Maternal-Infant Unit RN
Operating Room RN
Perioperative Area RN
Same Day Surgery (SDS)/Short Stay Surgery (SSS) RN
Outpatient RN
Ambulatory Care Clinics RN

Blood Bank RN
Endocrine/Infertility RN
Family Practice/Primary Care RN
Forensic RN
GYN-Oncology RN
Lactation Consultant RN
MRI/Angiography RN
Neurology RN
OB/GYN RN
Ophthalmology RN
Orthopedics RN
Ostomy RN
Otolaryngology RN
Pediatric Oncology RN
Pediatrics RN
Plastic Surgery RN
Pre-Op Anesthesia RN
Psychiatric RN
Radiation Oncology RN
Triage/ER RN
Urology RN
Case Manager RN
Charge Nurse RN
Health Educator RN
Radiology RN
*Licensed Practical (Vocational) Nurse (LPN/LVN) I, II, or III
*Certified Nursing Assistant (CNA) I, II, or III
Cardiac Technologist
Cardiovascular Technologist
Dietetic Technician
Echocardiographic Technician
Electrocardiograph Technician (EKG)
Electroencephalographic Technician (EEG)
EMT-A
Hemodialysis Technician
Occupational Therapy Aide
Ophthalmic Technician
Optician
Orthopedic Technologist
Perfusionist
*Phlebotomist
Physical Therapy Assistant
Psychiatric Technician
Surgical/OR Technician

*NOTE: The Service Contract Act Wage Determinations for the minimum requirement are located at Attachments IX and X.

NOTE: Service Contract Act Wage Determinations covering any state or county listed in Paragraph B.4 that apply to the additional positions shall be attached to the Request for Task Order Proposal Request.

B.8. The estimated ordering period is for 60 months beginning on the date of contract award or until the time the Government has issued Task Orders totaling the maximum quantity.

B.9. The period of performance of any Task Order shall be of one year or less in duration.

B.10. The Government reserves the right to reassign health care workers within a Military Treatment Facility (MTF), to meet patient demand.

B.11. Provided below is a schedule of services the Government intends to acquire from contract awardees. Each minimum quantity Lot (Lots 1 through 3) represents a clinic location at which services are required. Contract Line Item Numbers (CLINs) within each Lot represent the labor categories and amounts required for the clinic location.

Offerors shall provide hourly and total prices for the **minimum quantities (Lots 1 through 3) only**. Representative sample pricing for services in the maximum order quantities (lots 4 and 5) shall be provided and evaluated in accordance with Section L, L.7., through Notional Task Orders 0001 and 0002 provided in Section J, Attachments VI and VII.

This section shall be completed by the offeror and submitted with the business proposal (see Section L.7, Instructions for Preparation of Proposals).

Lot 1 (Minimum Quantity)

**Naval Medical Clinic, Quantico, VA (Attachment I)
Services for the period 1 Jun 2001 through 30 Sep 2001**

Line Item	Description	Quantity	Units	Unit Price	Total Price
0001	Family Nurse Practitioner				
0001AA	Family Nurse Practitioner	1386	Hours	\$	\$
0001AB	Orientation	(NTE) 32	Hours	\$	\$
0002	Registered Nurse				
0002AA	Registered Nurse	1386	Hours	\$	\$
0002AB	Orientation	(NTE) 32	Hours	\$	\$
Total Lot 1				\$ _____	

Lot 2 (Minimum Quantity)

**Naval Medical Clinic, Quantico, VA (Attachment II)
Services for the period 1 Jun 2001 through 30 Sep 2001**

Line Item	Description	Quantity	Units	Unit Price	Total Price
0003	Licensed Practical Nurse				
0003AA	Licensed Practical Nurse	3466	Hours	\$	\$
0003AB	Orientation	(NTE) 144	Hours	\$	\$
0004	Medical Assistant				
0004AA	Medical Assistant	2772	Hours	\$	\$
0004AB	Orientation	(NTE) 64	Hours	\$	\$
0005	Psychiatric Technician				
0005AA	Psychiatric Technician	693	Hours	\$	\$
0005AB	Orientation	(NTE) 16	Hours	\$	\$
Total Lot 2				\$ _____	

Lot 3 (Minimum Quantity)

National Naval Medical Center, Bethesda, MD (Attachment III)

Services for the period 1 Jun 2001 through 30 Sep 2001 and 29 Jul 01 through 30 Sep 01

Line Item	Description	Quantity	Units	Unit Price	Total Price
0006	Nurse Practitioner, Women's Health	(29 Jul 01- 30 Sep 01)	Hours	\$	\$
0006AA	Nurse Practitioner, Women's Health	360	Hours	\$	\$
0006AB	Orientation	(NTE) 32	Hours	\$	\$
0007	Licensed Practical Nurse	(1 Jun 01 – 30 Sep 01)			
0007AA	Licensed Practical Nurse	2772	Hours	\$	\$
0007AB	Orientation	(NTE) 144	Hours	\$	\$

Total Lot 3 \$_____

Total Lots 1-3 \$_____

Lot 4

Maximum quantities (Additional to minimum quantities)

Line Item	a) Description	Quantity (NTE)	Units	Unit Price	Total Price
0008	Dietician	5546	Hours	TBD	TBD
0009	Nurse Practitioner (NP)	8736	Hours	TBD	TBD
0010	NP Anesthetist	16364	Hours	TBD	TBD
0011	NP Family	30547	Hours	TBD	TBD
0012	NP Midwife	18960	Hours	TBD	TBD
0013	NP Pediatrics	4980	Hours	TBD	TBD
0014	NP Women's Health	47123	Hours	TBD	TBD
0015	Occupational Therapist	15913	Hours	TBD	TBD
0016	Optometrist	19240	Hours	TBD	TBD
0017	Physical Therapist	49035	Hours	TBD	TBD
0018	Physician Assistant	90708	Hours	TBD	TBD
0019	Podiatrist	6588	Hours	TBD	TBD
0020	Speech Pathologist	5575	Hours	TBD	TBD
	NURSING				
0021	Registered Nurses	198880	Hours	TBD	TBD
	CRITICAL CARE (RN)				
0022	Critical Care Unit (CCU)	199940	Hours	TBD	TBD
0023	Intensive Care Unit (ICU)	137320	Hours	TBD	TBD
0024	Neonatal Intensive Care Unit (NICU)	4875	Hours	TBD	TBD
0025	Pediatric Acute Care Unit (PACU)	15355	Hours	TBD	TBD
0026	Pediatric Intensive Care Unit (PICU)	5200	Hours	TBD	TBD
0027	Step-Down	20800	Hours	TBD	TBD
0028	Telemetry	20800	Hours	TBD	TBD
	MEDICAL/SURGICAL RN				
0029		325040	Hours	TBD	TBD
0030	Oncology	20800	Hours	TBD	TBD
0031	Psychiatric (Inpatient)	5200	Hours	TBD	TBD
	LABOR & DELIVERY RN				
0032		77720	Hours	TBD	TBD
0033	Maternal-Infant Unit	5460	Hours	TBD	TBD
	OPERATING ROOM RN				
0034		39010	Hours	TBD	TBD
0035	Perioperative Area	20800	Hours	TBD	TBD
0036	Same Day Surgery (SDS)/Short Stay Surgery (SSS)	5220	Hours	TBD	TBD
	OUTPATIENT RN				
0037		41625	Hours	TBD	TBD
0038	Ambulatory Care Clinics	37440	Hours	TBD	TBD
0039	Blood Bank	36400	Hours	TBD	TBD
0040	Endocrine/Infertility	20800	Hours	TBD	TBD
0041	Family Practice/Primary Care	41365	Hours	TBD	TBD
0042	Forensic	10400	Hours	TBD	TBD
0043	GYN-Oncology	20800	Hours	TBD	TBD

Lot 4

Maximum quantities (Additional to minimum quantities)

Line Item	a) Description	Quantity (NTE)	Units	Unit Price	Total Price
0044	Lactation Consultant	20800	Hours	TBD	TBD
0045	MRI/Angiography	20800	Hours	TBD	TBD
0046	Neurology	20800	Hours	TBD	TBD
0047	OB/GYN	10400	Hours	TBD	TBD
0048	Ophthalmology	26520	Hours	TBD	TBD
0049	Orthopedics	20800	Hours	TBD	TBD
0050	Ostomy	20800	Hours	TBD	TBD
0051	Otolaryngology	20800	Hours	TBD	TBD
0052	Pediatric Oncology	20800	Hours	TBD	TBD
0053	Pediatrics	72800	Hours	TBD	TBD
0054	Plastic Surgery	20800	Hours	TBD	TBD
0055	Pre-Op Anesthesia	20800	Hours	TBD	TBD
0056	Psychiatric	52000	Hours	TBD	TBD
0057	Radiation Oncology	20800	Hours	TBD	TBD
0058	Triage/ER	89440	Hours	TBD	TBD
0059	Urology	20800	Hours	TBD	TBD
0060	Case Manager	41525	Hours	TBD	TBD
0061	Charge Nurse	34320	Hours	TBD	TBD
0062	Health Educator	20800	Hours	TBD	TBD
0063	Radiology	72800	Hours	TBD	TBD
0064	Licensed Practical (Vocational) Nurse (LPN/LVN)	276923	Hours	TBD	TBD
0065	Certified Nursing Assistant (CNA)	41600	Hours	TBD	TBD
TECHNICIANS/OTHER					
0066	Cardiac Technologist	20800	Hours	TBD	TBD
0067	Cardiovascular Technologist	720	Hours	TBD	TBD
0068	Dietetic Technician	20800	Hours	TBD	TBD
0069	Echocardiographic Technician	10400	Hours	TBD	TBD
0070	Electrocardiograph Technician (EKG)	20800	Hours	TBD	TBD
0071	Electroencephalographic Technician (EEG)	20800	Hours	TBD	TBD
0072	EMT-A	28080	Hours	TBD	TBD
0073	Hemodialysis Technician	20800	Hours	TBD	TBD
0074	Medical Assistant	333390	Hours	TBD	TBD
0075	Occupational Therapy Aide	20800	Hours	TBD	TBD
0076	Ophthalmic Technician	26520	Hours	TBD	TBD
0077	Optician	16640	Hours	TBD	TBD
0078	Orthopedic Technologist	15600	Hours	TBD	TBD
0079	Perfusionist	20800	Hours	TBD	TBD
0080	Phlebotomist	20800	Hours	TBD	TBD
0081	Physical Therapy Assistant	15200	Hours	TBD	TBD
0082	Psychiatric Technician	53040	Hours	TBD	TBD
0083	Surgical/OR Technician	52000	Hours	TBD	TBD

B.12 Orientation / Training. Health Care Workers attending orientation / training will be paid at a rate not higher than their contractually agreed price (hourly wage) from Lots 1 through 3 and subsequent Task Order prices. (See Section C.6.1.8. "Orientation" for specific guidelines.).

Lot 5

Orientation. Maximum quantities (Additional to minimum quantities)

Line Item	a) Description	Quantity (NTE)	Units	Unit Price	Total Price
0084	Dietician	32	Hours	TBD	TBD
0085	Nurse Practitioner (NP)	51	Hours	TBD	TBD
0086	NP Anesthetist	95	Hours	TBD	TBD
0087	NP Family	133	Hours	TBD	TBD
0088	NP Midwife	110	Hours	TBD	TBD
0089	NP Pediatrics	29	Hours	TBD	TBD
0090	NP Women's Health	217	Hours	TBD	TBD
0091	Occupational Therapist	92	Hours	TBD	TBD
0092	Optometrist	118	Hours	TBD	TBD
0093	Physical Therapist	284	Hours	TBD	TBD
0094	Physician Assistant	526	Hours	TBD	TBD
0095	Podiatrist	38	Hours	TBD	TBD
0096	Speech Pathologist	32	Hours	TBD	TBD
0097					
	NURSING				
0098	Registered Nurses	1153	Hours	TBD	TBD
	CRITICAL CARE (RN)				
0099	Critical Care Unit (CCU)	1159	Hours	TBD	TBD
0100	Intensive Care Unit (ICU)	796	Hours	TBD	TBD
0101	Neonatal Intensive Care Unit (NICU)	28	Hours	TBD	TBD
0102	Pediatric Acute Care Unit (PACU)	101	Hours	TBD	TBD
0103	Pediatric Intensive Care Unit (PICU)	30	Hours	TBD	TBD
0104	Step-Down	121	Hours	TBD	TBD
0105	Telemetry	121	Hours	TBD	TBD
0106	MEDICAL/SURGICAL RN	1884	Hours	TBD	TBD
0107	Oncology	121	Hours	TBD	TBD
0108	Psychiatric (Inpatient)	30	Hours	TBD	TBD
0109	LABOR & DELIVERY RN	451	Hours	TBD	TBD
0110	Maternal-Infant Unit	19413	Hours	TBD	TBD
0111	OPERATING ROOM RN	226	Hours	TBD	TBD
0112	Perioperative Area	121	Hours	TBD	TBD
0113	Same Day Surgery (SDS)/Short Stay Surgery (SSS)	30	Hours	TBD	TBD
0114	OUTPATIENT RN	241	Hours	TBD	TBD
0115	Ambulatory Care Clinics	217	Hours	TBD	TBD
0116	Blood Bank	211	Hours	TBD	TBD
0117	Endocrine/Infertility	121	Hours	TBD	TBD
0118	Family Practice/Primary Care	279	Hours	TBD	TBD

Lot 5

Orientation. Maximum quantities (Additional to minimum quantities)

Line Item	a) Description	Quantity (NTE)	Units	Unit Price	Total Price
0119	Forensic	60	Hours	TBD	TBD
0120	GYN-Oncology	121	Hours	TBD	TBD
0121	Lactation Consultant	121	Hours	TBD	TBD
0122	MRI/Angiography	121	Hours	TBD	TBD
0123	Neurology	121	Hours	TBD	TBD
0124	OB/GYN	60	Hours	TBD	TBD
0125	Ophthalmology	160	Hours	TBD	TBD
0126	Orthopedics	121	Hours	TBD	TBD
0127	Ostomy	121	Hours	TBD	TBD
0128	Otolaryngology	121	Hours	TBD	TBD
0129	Pediatric Oncology	121	Hours	TBD	TBD
0130	Pediatrics	422	Hours	TBD	TBD
0131	Plastic Surgery	121	Hours	TBD	TBD
0132	Pre-Op Anesthesia	121	Hours	TBD	TBD
0133	Psychiatric	301	Hours	TBD	TBD
0134	Radiation Oncology	121	Hours	TBD	TBD
0135	Triage/ER	518	Hours	TBD	TBD
0136	Urology	121	Hours	TBD	TBD
0137	Case Manager	241	Hours	TBD	TBD
0138	Charge Nurse	199	Hours	TBD	TBD
0139	Health Educator	121	Hours	TBD	TBD
0140	Radiology	422	Hours	TBD	TBD
0141	Licensed Practical (Vocational) Nurse (LPN/LVN)	1635	Hours	TBD	TBD
0142	Certified Nursing Assistant (CNA)	241	Hours	TBD	TBD
TECHNICIANS/OTHER					
0143	Cardiac Technologist	121	Hours	TBD	TBD
0144	Cardiovascular Technologist	32	Hours	TBD	TBD
0145	Dietetic Technician	121	Hours	TBD	TBD
0146	Echocardiographic Technician	60	Hours	TBD	TBD
0147	Electrocardiograph Technician (EKG)	121	Hours	TBD	TBD
0148	Electroencephalographic Technician (EEG)	121	Hours	TBD	TBD
0149	EMT-A	163	Hours	TBD	TBD
0150	Hemodialysis Technician	121	Hours	TBD	TBD
0151	Medical Assistant	1957	Hours	TBD	TBD
0152	Occupational Therapy Aide	121	Hours	TBD	TBD
0153	Ophthalmic Technician	160	Hours	TBD	TBD
0154	Optician	96	Hours	TBD	TBD
0155	Orthopedic Technologist	90	Hours	TBD	TBD
0156	Perfusionist	121	Hours	TBD	TBD
0157	Phlebotomist	121	Hours	TBD	TBD
0158	Physical Therapy Assistant	88	Hours	TBD	TBD
0159	Psychiatric Technician	320	Hours	TBD	TBD
0160	Surgical/OR Technician	301	Hours	TBD	TBD

Lot 6

Incentive Awards.

0161 Incentive Awards. The Government reserves the right to make incentive awards on behalf of the health care workers, or directly to the contractor. These awards will be site or position specific based upon the Government's best business practice plan to minimize turn-over, maximize the mission of the command and/or reward exemplary individual work. Incentive plans may be contained in individual task orders for positions within the maximum quantities only. The Contractor shall pass all incentive fee award amount to the Contractor's healthcare worker(s). The Contractor agrees to only make deductions to the Incentive Fee Award to remain in compliance with the laws and regulations of the Internal Revenue Service, state, and local taxation authorities. The amount paid to the HCW, by the Contractor, shall not be reduced further.

NOT INITIALLY PRICED

END OF SECTION B

SECTION C – DESCRIPTION/SPECIFICATION/WORK STATEMENT

NOTE 1: The use of Commanding Officer means: Commanding Officer of the Medical Treatment Facility, or a designated representative, e.g., Contracting Officer's Representative (COR), Department Head, or the head of the activity designated in a particular task order.

NOTE 2: The term contractor means the offeror identified in block 15A of Standard Form 33 and its health care workers who are providing services under task orders placed under the contract.

NOTE 3: The term health care worker refers to the individual(s) providing services under this contract.

NOTE 4: The term MTF refers to the Military Treatment Facility or other Federal healthcare facility at which services are performed.

STATEMENT OF WORK

C.1 This Statement of Work (SOW) applies to all positions encompassed within this contract. Specific Statements of Work, for the Government's minimum quantity, are contained in Section J, Attachments I through III. Additional position specific Statements of Work for the maximum quantities under Lots 4 and 5 will be included with applicable subsequently issued Task Order proposal requests.

C.1.1 The contractor shall provide the primary healthcare personnel and related support services personnel in accordance with the terms and conditions of this contract and each task order issued under this contract.

C.1.2 Contractor services shall be provided for the treatment of active duty military personnel, their dependents, eligible DoD civilian employees, and other eligible beneficiaries, designated by the Government.

C.2 SUITS ARISING OUT OF MEDICAL MALPRACTICE

C.2.1 The healthcare worker(s) is(are) serving at the Medical Treatment Facility (MTF) under a personal services contract entered into under the authority of section 1091 of Title 10, United States Code. Accordingly, section 1089 of Title 10, United States Code shall apply to personal injury lawsuits filed against the health care worker(s) based on negligent or wrongful acts or omissions incident to performance within the scope of this contract.

C.2.2 The healthcare worker(s) is not required to maintain medical malpractice liability insurance.

C.2.3. Health care workers providing services under this contract shall be rendering personal services to the Government and shall be subject to day-to-day supervision and control by Government personnel. Supervision and control is the process by which the individual health care worker receives technical guidance, direction, and approval with regard to a task(s) within the requirements of this contract.

C.3 SCHEDULES, ABSENCES, AND LEAVE. Each task order will specify the work schedule of each health care worker and shall specify whether the health care worker will either: (1) accrue leave as an individual and be subject to approval by the Government for scheduling accrued leave; or (2) not accrue leave under the task order and be subject to replacement coverage by the contractor during all scheduled and unscheduled absences.

C.3.1 Individuals who accrue leave. Individual health care workers who accrue leave shall accrue an amount of personal leave as specified in the task order at the end of every 2-week period worked. Personal leave is subject to approval by the supervisor as specified in the task order and can be used for either annual leave (vacation) or sick leave. The specific work schedule for each 2-week period will be scheduled 1 month in advance by the Commanding Officer. Any changes in the schedule shall be coordinated between the individual health care worker and the Government.

C.3.2 Positions for which replacement coverage is required.

C.3.2.1 The Contractor shall have sufficient qualified reserve personnel so that all services are provided in the event a health care worker scheduled to work becomes ill, resigns, is terminated, or is otherwise unavailable to work. Contract requirements are not mitigated by inclement weather.

C.3.2.2 If a health care worker becomes ill or is otherwise unable to fulfill his/her obligation to work, they shall notify the contractor who in turn shall notify the COR.

C.3.2.3 The Contractor is responsible for replacing a health care worker who for any reason: (1) misses more than 2 hours of a shift; or (2) has more than 2 hours remaining in their shift.

C.3.2.4 The Contractor shall provide replacement coverage by a health care worker who, at a minimum, meets the minimum health care worker contract qualifications and is approved for work (e.g., has been credentialed and privileged as appropriate and has satisfactorily completed orientation).

C.3.2.5 The Contractor shall prepare the schedule of workers for all positions for which replacement coverage is required. The specific schedule for each 2-week period shall be provided to the COR 1 month in advance of the 2-week period. The schedule shall be complete and include the name of the specific individual(s) who will provide the required coverage.

C.3.3 Provisions for all health care workers.

C.3.3.1 Administrative Leave. For unusual and compelling circumstances (e.g., weather emergencies) in which the Commanding Officer either excuses all facility personnel from reporting to work or dismisses all personnel early, the Commanding Officer is authorized to grant administrative leave to the health care worker. This administrative leave may be compensated leave.

C.3.3.2 Furlough. Unless otherwise authorized by a defense appropriations bill, contractors shall not be reimbursed by the Government for services not rendered during a Government furlough. In the event of a Government Furlough, the Commanding Officer will determine which contract employees are considered critical and therefore must report to work. Contract employees deemed critical shall be compensated for services rendered during a furlough. All other contract employees shall be furloughed until the Government shutdown ends or they are notified by the Contracting Officer's Representative that they have become critical employees.

C.3.3.3 A health care worker with a bona fide medical emergency occurring while on duty or with an on-the-job injury will be provided medical care until the condition is stabilized. The contractor will reimburse the Government for all medical services provided unless the health care worker is otherwise entitled to Government medical services.

C.3.3.4 In the instance where the Government directs the health care worker to remain on duty in excess of their scheduled shift due to an unforeseen emergency or to complete patient treatment where lack of continuity of care would otherwise jeopardize patient health, the health care worker shall remain on duty. The health care worker will be given an equal amount of compensatory time to be scheduled upon mutual agreement of the healthcare worker and the Commanding Officer. This provision is not intended to apply to the time required to complete routine tasks (e.g., completion of paperwork or routine administrative tasks at the end of a shift) which are to be completed as part of the shift.

C.4 FAILURE AND/OR INABILITY TO PERFORM

C.4.1 Should a healthcare worker, who accrues leave and is subject to Government approval of the leave schedule, be unable to perform duties under any Task Order due to medical or physical disability for more than 13 consecutive days, that individuals' performance under the Task Order may be suspended by the Contracting Officer until such medical or physical disability is resolved. If performance under the Task Order is so suspended, no reimbursement shall be made to the contractor for the affected healthcare worker so long as performance is suspended.

C.4.2 If clinical privileges of a health care worker have been summarily suspended pending an investigation into questions of professional ethics or conduct, performance under the Task Order may be suspended until clinical privileges are reinstated. No reimbursement shall be made to the contractor for the affected healthcare worker so long

as performance is suspended. The denial, suspension, limitation, or revocation of clinical privileges based upon practitioner impairment or misconduct will be reported to the appropriate licensing authorities of the state in which the license is held.

C.4.3 Any healthcare worker(s) demonstrating impaired judgment, will be removed from providing healthcare services. The Government reserves the right to remove any employee who, in the judgment of a licensed physician, is impaired by drugs or alcohol.

C.4.4 Any healthcare worker(s) with alcohol or drug abuse problems may be allowed to return to work under the terms of this contract only with prior Government approval.

C.5 GENERAL PROVISIONS FOR HEALTH CARE WORKERS.

C.5.1 Health care workers shall comply with Executive Order 12731, October 17, 1990, (55 Fed. Reg. 42547), Principles of Ethical Conduct for Government Officers and Employees, and shall also comply with Department of Defense (DOD) other government regulations implementing this Executive Order.

C.5.2 Health care workers shall become acquainted with and obey all station regulations, shall perform in a manner to preclude the waste of utilities, and shall not use Government telephones for personal business. All motor vehicles operated on these installations by health care workers shall be registered with the base security service according to applicable directives. Eating by health care workers is prohibited in patient care areas/clinics and is restricted to designated areas. Smoking is prohibited in all clinic facilities.

C.5.3 Health care workers ARE NOT prohibited, by reason of employment under this contract, from conducting a private practice or other employment so long as there is no conflict with the performance of duties under this contract. However, such private practice or other such employment shall not be conducted during those hours in which the healthcare worker is required to render services under this contract. Health care workers shall make no use of Government facilities or property in connection with such other employment. (See Attachment V, NAVMED P-117).

C.5.4 While on duty, health care workers shall not advise, recommend, or suggest to individuals authorized to receive services at Government expense that such individuals should receive services from the health care worker when they are not on duty, or from a partner or group associated in practice with the contractor, except with the express written consent of the Commanding Officer. The contractor shall not bill individuals entitled to those services rendered pursuant to this contract.

C.5.5 Health care workers shall be neat, clean, well groomed, and in appropriate clothing when in patient care and public areas. All clothing shall be free of visible dirt and stains, and shall fit correctly. Fingernails shall be clean and free from dirt and hair shall be neatly trimmed and combed. Health care workers shall display an identification badge, which includes the health care worker's full name and professional status (furnished by the Government) on the right breast of the outer clothing. Security badges provided by the Government shall be worn when on duty.

C.5.6 The Secretary of the Navy has determined that the illegal possession or use of drugs and paraphernalia in a military setting contributes directly to military drug abuse and undermines Command efforts to eliminate drug abuse among military personnel. The policy of the Department of the Navy (including the Marine Corps) is to deter and detect drug offenses on military installations. Measures to be taken to identify drug offenses on military installations, and to prevent introduction of illegal drugs and paraphernalia, include routine random inspection of vehicles while entering or leaving, with drug detection dogs when available, and random inspection of personal possessions on entry or exit. If there is probable cause to believe that a health care worker has been engaged in use, possession, or trafficking of drugs, the health care worker may be detained for a limited period of time until he/she can be removed from the installation or turned over to local law enforcement personnel having jurisdiction. When illegal drugs are discovered in the course of an inspection or search of a vehicle operated by a health care worker, the health care worker and vehicle may be detained for a reasonable period of time necessary to surrender the individual and vehicle to appropriate civil law enforcement personnel. Action may be taken to suspend, revoke, or deny clinical privileges as well as installation driving privileges. Implicit with the acceptance of this contract is the agreement by the health care worker to comply with all Federal and State laws as well as regulations issued by the Commander of the military installation concerning illegal drugs and paraphernalia.

C.5.7 All financial, statistical, personnel, and technical data which are furnished, produced or otherwise available to the contractor during the performance of this contract are considered confidential business information and shall not be used for purposes other than performance of work under this contract. Such data shall not be released by the contractor without prior written consent of the COR. Any presentation of any statistical or analytical materials, or any reports based on information obtained from studies covered by this contract, will be subject to review and approval by the COR before publication or dissemination.

C.6. PERSONNEL QUALIFICATIONS

The contractor shall provide personnel having certain minimum levels of training and experience. Basic qualification requirements are contained in this section. Additional qualifications specific to a particular Task Order are contained in that Task Order. Additional qualifications may include, but are not be limited to, experience, board certification for physicians, or other professional certifications appropriate to the particular labor category. Positions for which basic qualifications are given are as follows:

Labor Category	Qualifications	Duties
MID LEVELS		
Dietician	C.6.2.1	C.7.4.1
Nurse Practitioner (NP)	C.6.2.2	C.7.4.2
NP Anesthetist	C.6.2.3	C.7.4.2.2
NP Family	C.6.2.4	C.7.4.2.3
NP Midwife	C.6.2.5	C.7.4.3
NP Pediatrics	C.6.2.6	C.7.4.4
NP Women's Health	C.6.2.7	C.7.4.5
Occupational Therapist	C.6.2.8	C.7.5
Optometrist	C.6.2.9	C.7.6
Physical Therapist	C.6.2.10	C.7.7
Physician Assistant	C.6.2.11	C.7.8
Podiatrist	C.6.2.12	C.7.9
Speech Pathologist	C.6.2.13	C.7.10
	<u>NURSING</u>	
REGISTERED NURSES	C.6.2.14	C.7.11
CRITICAL CARE (RN)		
Critical Care Unit (CCU)	C.6.2.15	C.7.12
Intensive Care Unit (ICU)	C.6.2.15.1	C.7.12
Neonatal Intensive Care Unit (NICU)	C.6.2.15.2	C.7.13
Post Anesthesia Care Unit	C.6.2.15.1	C.7.12
Pediatric Intensive Care Unit (PICU)	C.6.2.15.2	C.7.14
Step-Down	C.6.2.15.1	C.7.15
Telemetry	C.6.2.15.2	C.7.15
MEDICAL/SURGICAL RN	C.6.2.15.3	C.7.16
Oncology	C.6.2.15.4	C.7.16.1
Psychiatric (Inpatient)	C.6.2.15.5	C.7.16.2
LABOR & DELIVERY RN	C.6.2.15.6	C.7.17
Maternal-Infant Unit	C.6.2.15.7	C.7.18
OPERATING ROOM RN	C.6.2.15.8	C.7.19
Perioperative Area	C.6.2.15.9	C.7.19
Same Day Surgery (SDS)/Short Stay Surgery (SSS)	C.6.2.15.8	C.7.19
OUTPATIENT RN	C.6.2.16	C.7.20

Ambulatory Care Clinics	C.6.2.16.1	C.7.20.1
Blood Bank	C.6.2.16.2	C.7.20.2
Endocrine/Infertility	C.6.2.16.3	C.7.20.3
Family Practice/Primary Care	C.6.2.16.4	C.7.20.4
Forensic	C.6.2.16.5	C.7.20.5
GYN-Oncology	C.6.2.16.6	C.7.20.6
Lactation Consultant	C.6.2.16.7	C.7.20.7
MRI/Angiography	C.6.2.16.8	C.7.20.8
Neurology	C.6.2.16.9	C.7.20.9
OB/GYN	C.6.2.16.10	C.7.20.10
Ophthalmology	C.6.2.16.11	C.7.20.11
Orthopaedics	C.6.2.16.12	C.7.20.12
Ostomy	C.6.2.16.13	C.7.20.13
Otolaryngology	C.6.2.16.14	C.7.20.14
Pediatric Oncology	C.6.2.16.15	C.7.20.15
Pediatrics	C.6.2.16.16	C.7.20.16
Plastic Surgery	C.6.2.16.17	C.7.20.17
Pre-Op Anesthesia	C.6.2.16.18	C.7.20.18
Psychiatric	C.6.2.16.19	C.7.20.19
Radiation Oncology	C.6.2.16.20	C.7.20.20
Triage/ER	C.6.2.16.21	C.7.20.21
Urology	C.6.2.16.22	C.7.20.22
Case Manager	C.6.2.17	C.7.21
Charge Nurse	C.6.2.18	C.7.22
Health Educator	C.6.2.19	C.7.23
Radiology	C.6.2.20	C.7.24
Licensed Practical (Vocational) Nurse (LPN/LVN)	C.6.3	C.7.25
Certified Nursing Assistant (CNA)	C.6.4	C.7.26
TECHNICIANS/OTHER		
Cardiac Technologist	C.6.5	C.7.27
Cardiovascular Technologist	C.6.6	C.7.28
Dietetic Technician	C.6.7	C.7.29
Echocardiographic Technician	C.6.8	C.7.30
Electrocardiograph Technician (EKG)	C.6.9	C.7.31
Electroencephalographic Technician (EEG)	C.6.10	C.7.32
EMT-A	C.6.11	C.7.33
Hemodialysis Technician	C.6.12	C.7.34
Medical Assistant	C.6.13	C.7.35
Occupational Therapy Aide	C.6.14	C.7.36
Ophthalmic Technician	C.6.15	C.7.37
Optician	C.6.17	C.7.39
Orthopaedic Technologist	C.6.18	C.7.40
Perfusionist	C.6.19	C.7.41
Phlebotomist	C.6.20	C.7.42
Physical Therapy Assistant	C.6.21	C.7.43
Psychiatric Technician	C.6.22	C.7.44
Surgical/OR Technician	C.6.23	C.7.45

C.6.1. GENERAL QUALIFICATIONS THAT APPLY TO ALL HEALTH CARE WORKERS

C.6.1. Health care workers shall read, write, speak, and understand the English language fluently and maintain good communication skills with patients and other healthcare personnel.

C.6.1.1. Health care workers shall be physically capable of standing and/or sitting for extended periods of time and capable of normal ambulation.

C.6.1.2. Health care workers shall be eligible for U.S. employment. No alien shall be allowed to perform under this contract in violation of the Immigration Laws of the United States.

C.6.1.3. Health care workers shall represent an acceptable malpractice risk to the Government.

C.6.1.4. Health care workers shall maintain current certification in American Heart Association Basic Life Support (BLS) for Healthcare Providers; American Heart Association Healthcare Provider Course; American Red Cross CPR (Cardio Pulmonary Resuscitation) for the Professional Rescuer; or equivalent.

C.6.1.5. Each health care worker shall obtain, at contractor expense, a statement from the health care worker's physician or a report of a physical examination within 60 days prior to start of services indicating that the health care worker is free from mental or physical impairments which would restrict the health care worker from providing the services described in the task. Health care workers hired after contract start shall be required to provide a physical exam statement or report obtained within 60 days prior to performance of services. The statement must contain the following information: "Having performed a physical examination on the person named below on (insert date), the following findings are true and accurate:

1. **(Name of health care worker)** is suffering from no physical disability which would restrict him/her from providing services as a **(specialty)**.

2. **(Name of health care worker)** is not suffering from tuberculosis, hepatitis, sexually transmitted or other contagious diseases which restricts them from providing services as a **(specialty)**. **(Name of health care worker)** has had a current (within 6 months) TB skin test (mantoux) reading or if a known reactor, an evaluation indicating no active disease.

3. **(Name of health care worker)** is considered free from Hepatitis B infection on the basis of having (circle the applicable number):

3a. Received at least 3 doses of recombinant hepatitis B vaccine currently licensed in the United States, or,

3b. Received an initial dose of the hepatitis B vaccine. The vaccine series shall be completed within 6 months of the employee start date, or,

3c. Provided documentation of the health care worker's waiver which declines the hepatitis B vaccine as set forth in OSHA guidelines (declination on the basis of religious convictions or medical contraindication only), or,

3d. Provided evidence of immunologically effective anti-HB levels in lieu of proof of recombinant hepatitis B vaccines. Assays must be performed in a laboratory accredited by the American Society of Clinical Pathologists (ASCP) and/or the College of American Pathologists (CAP).

4. **(Name of health care worker)** is considered to have evidence of immunity to Measles, Mumps and Rubella (MMR) by either **(circle 1)**: positive antibody titer, evidence of MMR immunization or, documentation of physician-diagnosed MMR. The health care worker shall also provide evidence of varicella immune status or a statement of history of chicken pox. For individuals who do not show a positive antibody titer after immunization and appear to have a "non-immune" status, that employee must report varicella exposure to the COR and may need to be removed from patient care duties for up to 21 days and replaced by the contractor.

5. The health care worker must provide a current Purified Protein Derivative (PPD) reading, or evaluation if known PPD reactor, on an annual basis.

(signed)

Examining Physician

Examining Physician Information:

Name:

Address:

Telephone: _____ Date: _____

C.6.1.6.1. Except as provided in paragraph C.6.1.6.2, no medical tests or procedures required by the contract may be performed at the MTF. Expenses for all required tests and/or procedures shall be borne by the contractor at no additional expense to the Government.

C.6.1.6.2. Further, health care workers shall agree to undergo personal health examinations and such other medical and dental examinations at any time during the term of this contract, as the Commanding Officer may deem necessary for preventive medicine, performance improvement, or privileging purposes. These examinations will be provided by the Government. If the contractor chooses, these examinations may be provided by private physician or dentist, at no expense to the Government. Additionally the health care worker must be immunized annually with the influenza vaccine in accordance with the BUMED instruction currently in effect. This vaccine will be provided by the Government. Although this vaccine will be provided by the Government, it may be obtained at other facilities with the cost being borne by the health care worker. Unless vaccinated by the Government, the health care worker shall be required to show proof of the vaccination. If, the health care worker chooses to be immunized by the Government they shall be required to sign a waiver in accordance with MTF rules and regulations. If the health care worker declines the immunization, they must provide documentation of the waiver which declines the influenza vaccine (declination on the basis of religious convictions or medical contraindications only).

C.6.1.6.3. The management of HIV positive health care workers shall be consistent with current Center for Disease Control Guidelines (CDC) guidelines and Section 503 of Rehabilitation Act (29 U.S.C. Section 793) and its implementing regulations (41 CFR Part 60-741).

C.6.1.7. CREDENTIALING REQUIREMENTS

C.6.1.7.1. Following award of a task order, the contractor shall submit to the Professional Affairs Department, via the COR, a completed Individual Credentials File (ICF) for each dietician, Nurse Practitioner, occupational therapist, optometrist, physical therapist, physician assistant, podiatrist, and speech pathologist. The ICF, which will be maintained at the MTF, contains specific information with regard to qualifying degrees and licenses, past professional experience and performance, education and training, health status, and competency as identified in Appendix R of BUMEDINST 6320.66B of Nov 97 and subsequent revisions. ICFs for health care practitioners who do not currently have an ICF on file at the facility shall be submitted at least 30 days prior to commencement of services. For those health care providers who currently have an ICF on file, an updated Personal and Professional Information Sheet (PPIS) for Privileged Providers, with notation that a complete up-to-date ICF is on file, shall be submitted no less than 15 days prior to commencement of services.

C.6.1.7.2. Following award of a task order, the contractor shall submit to the Professional Affairs Department, via the COR, a completed Individual Professional File (IPF) for each licensed staff member not included in the requirements for ICFs. The IPF, which will be maintained at the MTF, contains specific information with regard to qualifying degrees and licenses, past professional experience and performance, education and training, health status, and competency as identified in Appendix S of BUMEDINST 6320.66B of Nov 97 and subsequent revisions. IPFs for personnel who do not currently have an IPF on file at the facility shall be submitted at least 30 days prior to commencement of services. For those personnel who currently have an IPF on file, an updated Personal and Professional Information Sheet (PPIS) for Nonprivileged Providers, with notation that a complete up-to-date IPF is on file, shall be submitted no less than 15 days prior to commencement of services.

C.6.1.7.3. Upon receipt of a complete ICF or IPF, the COR will forward it to the Professional Affairs Department for approval and credentialing of the individual health care provider/worker. The Professional Affairs Department will

ensure the ICF or IPF is complete in accordance with BUMEDINST 6320.66B. The contractor shall not assign an individual to work at the MTF until the health care worker's ICF or IPF has been approved by the MTF.

C.6.1.7.4. A copy of BUMEDINST 6320.66B is available at <http://navymedicine.med.navy.mil/bumed/instructions/external/external.htm>.

C.6.1.8. ORIENTATION

C.6.1.8.1. Prior to providing service under this contract or resultant Task Orders, each health care worker shall undergo an orientation. Orientation may be waived for personnel who have previously provided service at the treatment facility.

C.6.1.8.2. Orientation shall consist of 8 hours of Command Orientation (which includes annual training requirements for topics such as fire, safety, infection control, and family advocacy) and 8 hours of information systems orientation (which includes the Composite Health Care System (CHCS) and the Ambulatory Data System (ADS)).

C.6.1.8.3. In addition, health care workers identified as CHCS Super-users shall undergo an additional 8 hours of orientation training. Requirements for CHCS Super-users are specified in the applicable Task Orders.

C.6.1.8.4. Orientation shall take place at a mutually agreeable time. This will normally be held during the 1 month period immediately preceding the commencement of service by the health care worker.

C.6.2. SPECIFIC QUALIFICATIONS FOR EACH LABOR CATEGORY. Each health care worker shall meet and maintain the qualifications specified below for their labor category unless otherwise stated in the task order.

C.6.2.1. DIETICIAN

C.6.2.1.1. Possess a Baccalaureate Degree in nutrition from a school accredited by the American Dietetics Association (ADA).

C.6.2.1.2. Possess registration as a Dietician with the ADA.

C.6.2.1.3. Possess and maintain a valid, unrestricted license or certification to practice as a dietician in any 1 of the 50 States, the District of Columbia, the Commonwealth of Puerto Rico, Guam or the U.S. Virgin Islands. The health care worker is responsible for complying with all applicable licensing and certification regulations.

C.6.2.1.4. Possess a minimum of 1 year experience within the preceding 3 years.

C.6.2.2. NURSE PRACTITIONER

C.6.2.2.1. Possess certification as a Nurse Practitioner as determined by the American Nurses Credentialing Center (ANCC) or the American Association of Nurse Practitioners (AANP).

C.6.2.2.2. Possess and maintain a valid unrestricted license to practice as a Registered Nurse in any 1 of the 50 states, the District of Columbia, the Commonwealth of Puerto Rico, Guam, or the U.S. Virgin Islands. The health care worker is responsible for complying with all applicable licensing regulations. Additionally, health care workers licensed outside of the 50 States must provide proof of having successfully passed the National Council Licensure Exam (NCLEX).

C.6.2.2.3. Possess specialty certification from the ANCC or AANP.

C.6.2.2.4. Possess a minimum of 1 year experience within the preceding 3 years.

C.6.2.3. NURSE PRACTITIONER, ANESTHETIST

C.6.2.3.1. Graduate from a Masters Nursing Anesthesia Education Program accredited by the Council of Nurse Anesthesia Education Program.

C.6.2.3.2. Possess and maintain a valid unrestricted license to practice as a Registered Nurse in any 1 of the 50 states, the District of Columbia, the Commonwealth of Puerto Rico, Guam, or the U.S. Virgin Islands. The health care worker is responsible for complying with all applicable licensing regulations. Additionally, health care workers licensed outside of the 50 States must provide proof of having successfully passed the National Council Licensure Exam (NCLEX).

C.6.2.3.3. Possess current certification as a Registered Nurse Anesthetist with the American Association of Nurse Anesthetists.

C.6.2.3.4. Possess experience as a nurse anesthetist of at least 12 months within the preceding 36 months.

C.6.2.3.5. Possess current Advanced Cardiac Life Support Certification (ACLS).

C.6.2.4. NURSE PRACTITIONER, FAMILY PRACTICE

C.6.2.4.1. Graduate of a Masters of Nursing program accredited by the National League for Nursing Accrediting Commission (NLNAC).

C.6.2.4.2. Possess and maintain a valid unrestricted license to practice as a Registered Nurse in any 1 of the 50 states, the District of Columbia, the Commonwealth of Puerto Rico, Guam, or the U.S. Virgin Islands. The health care worker is responsible for complying with all applicable licensing regulations. Additionally, health care workers licensed outside of the 50 States must provide proof of having successfully passed the National Council Licensure Exam (NCLEX).

C.6.2.4.3. Current certification as a Family Nurse Practitioner by the American Nurses Credentialing Center (ANCC) or American Academy of Nurse Practitioners (AANP).

C.6.2.4.4. Experience as a Family Nurse Practitioner in an outpatient setting of at least 12 months in the last 24 months.

C.6.2.5. NURSE PRACTITIONER, MIDWIFE

C.6.2.5.1. Possess and maintain current certification by the American College of Nurse-Midwives.

C.6.2.5.2. Possess and maintain a valid unrestricted license to practice as a Registered Nurse in any 1 of the 50 states, the District of Columbia, the Commonwealth of Puerto Rico, Guam, or the U.S. Virgin Islands. The health care worker is responsible for complying with all applicable licensing regulations. Additionally, health care workers licensed outside of the 50 States must provide proof of having successfully passed the National Council Licensure Exam (NCLEX).

C.6.2.5.3. Experience as an OB-GYN Nurse Practitioner of Certified Nurse Midwife for at least 12 months (40 hours per week) within the preceding 36 months.

C.6.2.6. NURSE PRACTITIONER, PEDIATRICS

C.6.2.6.1. Graduate of a Masters of Nursing program accredited by the National League for Nursing Accrediting Commission (NLNAC).

C.6.2.6.2. Possess and maintain a valid unrestricted license to practice as a Registered Nurse in any 1 of the 50 states, the District of Columbia, the Commonwealth of Puerto Rico, Guam, or the U.S. Virgin Islands. The health care worker is responsible for complying with all applicable licensing regulations. Additionally, health care workers licensed outside of the 50 States must provide proof of having successfully passed the National Council Licensure Exam (NCLEX).

C.6.2.6.3. Current certification as a Pediatric Nurse Practitioner by the American Nurses Credentialing Center (ANCC) or American Academy of Nurse Practitioners (AANP).

C.6.2.6.4. Experience as a Pediatric Nurse Practitioner in an outpatient setting of at least 12 months in the last 24 months.

C.6.2.7. NURSE PRACTITIONER, WOMEN'S HEALTH

C.6.2.7.1. Graduate of a Masters of Nursing program accredited by either the National League for Nursing Accrediting Commission (NLNAC) or the American Nurses Association (ANA).

C.6.2.7.2. Possess and maintain a valid unrestricted license to practice as a Registered Nurse in any 1 of the 50 states, the District of Columbia, the Commonwealth of Puerto Rico, Guam or the U.S. Virgin Islands. The health care worker is responsible for complying with all applicable licensing regulations. Additionally, health care workers licensed outside of the 50 states must provide proof of having successfully passed the National Council Licensure Exam (NCLEX).

C.6.2.7.3. Possess and maintain current certification as a Nurse Midwife or as an OB/GYN Nurse Practitioner by either (1) the American College of Nurse-Midwives (ACNM) or (2) the National Certification Corporation for the Obstetric, Gynecologic and Neonatal Nursing Specialties (NCC).

C.6.2.7.4. Possess and maintain current certification in Basic Life Support (BLS) and Advanced Cardiac Life Support (ACLS).

C.6.2.7.5. Possess at least 12 months experience within the preceding 24 months as a Nurse Midwife or OB/GYN Nurse Practitioner in an outpatient setting.

C.6.2.8. OCCUPATIONAL THERAPIST

C.6.2.8.1. Possess a Bachelors Degree or Masters of Science Degree in Occupational therapy from an accredited college of Occupational therapy.

C.6.2.8.2. Possess and maintain a valid, unrestricted license to practice as an occupational therapist in any 1 of the 50 States, the District of Columbia, the Commonwealth of Puerto Rico, Guam or the U.S. Virgin Islands and/or current certification along with standing with the National Board for Certification for Occupational Therapists. The health care worker is responsible for complying with all applicable licensing regulations.

C.6.2.8.3. Possess membership in good standing with the National American Occupational Therapy Association.

C.6.2.8.4. Possess a minimum of 1 year experience within the preceding 3 years.

C.6.2.9. OPTOMETRIST

C.6.2.9.1. Possess a Doctorate Degree in Optometry from an accredited college approved by the Council of Optometric Education of the American Optometric Association.

C.6.2.9.2. Possess and maintain a valid unrestricted license to practice optometry in any 1 of the 50 states, the District of Columbia, the Commonwealth of Puerto Rico, Guam, or the U.S. Virgin Islands. The health care worker is responsible for complying with all applicable licensing regulations. Additionally, health care workers licensed outside of the 50 States must provide proof of having successfully passed the National Council Licensure Exam (NCLEX).

C.6.2.9.3. Possess a minimum of 1 year experience within the preceding 3 years.

C.6.2.9.4. Possess current certification in the use of diagnostic pharmaceutical agents.

C.6.2.9.5. Possess current certification in Basic Life Support (BLS).

C.6.2.10. PHYSICAL THERAPIST

C.6.2.10.1. Possess a Bachelors Degree or Masters of Science Degree in Physical Therapy from a college of Physical Therapy accredited by the American Physical Therapy Association

– OR –

a Bachelors of Science Degree with Certificate.

C.6.2.10.2. Possess at least 2 years post graduate experience as a physical therapist within the preceding 5 years.

C.6.2.10.3. Possess a current, unrestricted license to practice physical therapy in any 1 of the 50 states, the District of Columbia, the Commonwealth of Puerto Rico, Guam, or the U.S. Virgin Islands. The health care worker is responsible for complying with all applicable licensing regulations. Additionally, health care workers licensed outside of the 50 States must provide proof of having successfully passed the National Council Licensure Exam (NCLEX).

C.6.2.11. PHYSICIAN ASSISTANT

C.6.2.11.1. Graduation from a Physician Assistant training program accredited by the Committee on Allied Health Education and Accreditation (CAHEA).

C.6.2.11.2. Current certification by the National Commission on Certification of Physicians' Assistants.

C.6.2.11.3. A minimum of 1 year of full-time experience within the last 3 years as a Physician Assistant.

C.6.2.12. PODIATRIST

C.6.2.12.1. Possess a Doctorate Degree in Podiatry Medicine from a college accredited by the Council on Podiatric Medical Education (American Podiatric Medical Association)

C.6.2.12.2. Possess a current, valid, unrestricted license to practice podiatric medicine (podiatry) in any 1 of the 50 states, the District of Columbia, the Commonwealth of Puerto Rico, Guam, or the U.S. Virgin Islands. The health care worker is responsible for complying with all applicable licensing regulations. Additionally, health care workers licensed outside of the 50 States must provide proof of having successfully passed the National Council Licensure Exam (NCLEX).

C.6.2.12.3. Possess experience working as a practicing podiatrist of at least 3 years within the preceding 4 years.

C.6.2.13. SPEECH PATHOLOGIST

C.6.2.13.1. Possess an MS or MA Degree in Speech Pathology with the completion of a clinical fellowship year (CFY).

C.6.2.13.2. Possess and maintain a valid unrestricted license to practice as a Registered Nurse in any 1 of the 50 states, the District of Columbia, the Commonwealth of Puerto Rico, Guam, or the U.S. Virgin Islands. The health care worker is responsible for complying with all applicable licensing regulations. Additionally, health care workers licensed outside of the 50 States must provide proof of having successfully passed the National Council Licensure Exam (NCLEX).

C.6.2.13.3. Possess a certificate of Clinical Competence by American Speech, Language, Hearing Association (ASLHA).

C.6.2.13.4. Possess documentation of ASLHA membership.

C.6.2.13.5. Possess a minimum of 1 year experience within the preceding 3 years.

C.6.2.14. REGISTERED NURSE

C.6.2.14.1. Education as follows: Either a Baccalaureate Degree in Nursing

– OR –

a Diploma Graduate in Nursing

– OR –

an Associate Degree in Nursing.

C.6.2.14.2. Possess and maintain a valid unrestricted license to practice as a Registered Nurse in any 1 of the 50 states, the District of Columbia, the Commonwealth of Puerto Rico, Guam, or the U.S. Virgin Islands. The health care worker is responsible for complying with all applicable licensing regulations. Additionally, health care workers licensed outside of the 50 States must provide proof of having successfully passed the National Council Licensure Exam (NCLEX).

C.6.2.14.3. Prior to commencing service under this contract, Contractor nurses must attend a 2-hour lecture on IV certification. Contract nurses must then obtain certifications (e.g., IV, medications and blood administration) in accordance with clinic nursing service and command policy not later than 60 days after commencement of services, including MTF observation of 3 completed IV sticks during this time.

C.6.2.15. CRITICAL CARE AREA RN {CCU, ICU, MICU, NICU, PACU, PICU, STEP-DOWN, TELEMETRY}

C.6.2.15.1. CRITICAL CARE RN. Additional qualifications for Critical Care Registered Nurses: (Applicable to personnel working in ICU/TICU, CCU, Telemetry Unit, Post Anesthesia Care Unit (PACU) and Cardiology and Dialysis clinics).

C.6.2.15.1.1. Evidence of ABG Certification prior to performance of the task.

C.6.2.15.1.2. Minimum of 3 years' full-time experience within the last 5 years as an RN in a critical care area.

C.6.2.15.1.3. Successful completion of a hospital critical care training program acceptable to the American Association of Critical Care Nurses or its equivalent, consisting of a minimum of a 1 week course including but not limited to:

- Neurologic, cardiovascular, pulmonary, renal, endocrine and GI pathophysiology
- Electrocardiography
- Hemodynamic monitoring
- Artificial airways and mechanical ventilators
- Intra-aortic balloon pumps
- Critical care pharmacology
- Critical care lab analysis (ABGs, CBC, Electrolytes)
- I.V. Therapy
- Neuro-invasive monitoring (ICPs)

C.6.2.15.1.4. Current certification and maintenance of certification in Advanced Life Support (ALS), Neonatal Advanced Life Support (NALS) and/or Pediatric Advanced Life Support (PALS) (unit specific).

C.6.2.15.1.5. Intravenous (IV) certification (specific to area assigned) within 3 months of starting work on this contract.

C.6.2.15.2. PEDIATRIC AREA RN. Additional qualifications for Pediatric Area Registered Nurses: (Applicable to personnel working in the Pediatric Intensive Care Unit (PICU) and the Neonatal Intensive Care Unit (NICU)).

C.6.2.15.2.1. Minimum of 2 years' full-time experience within the last 3 years as an RN in a critical care area. Current certification and maintenance of certification in Pediatric Advanced Life Support (PALS) and Advanced Life Support (ALS) in PICU and Neonatal Advanced Life Support (NALS) in NICU.

C.6.2.15.2.2. Successful completion of a hospital critical care training program acceptable to the American Association of Critical Care Nurses or its equivalent, consisting of a minimum of a 1 week course including but not limited to:

- Neurologic, cardiovascular, pulmonary, renal, endocrine and GI pathophysiology
- Electrocardiography
- Hemodynamic monitoring
- Artificial airways and mechanical ventilators
- Intra-aortic balloon pumps
- Critical care pharmacology
- Critical care lab analysis (ABGs, CBC, Electrolytes)
- I.V. Therapy
- Neuro-invasive monitoring (ICPs)

C.6.2.15.2.3. Intravenous (IV) certification, specific to area assigned, within 3 months of starting to work for this contract.

C.6.2.15.2.4. Verifiable experience with neonates requiring ventilatory support, umbilical catheters, etc. (**NICU only**).

C.6.2.15.2.5. Competency in pediatric specific intravenous push (IVP).

C.6.2.15.2.6. Verifiable experience in caring for pediatric patients with central lines, receiving chemotherapy.

C.6.2.15.3. MEDICAL/SURGICAL RN

C.6.2.15.3.1. Possess a minimum of 1 year experience in nursing within the preceding 2 years.

C.6.2.15.3.2. Possess a minimum of 1 year of specialized experience in a medical/surgical nursing unit within the preceding 6 years in addition to C.6.2.15.3.1.

C.6.2.15.4. ONCOLOGY RN

C.6.2.15.4.1. Qualification for chemotherapy certification must be obtained within 6 months following employment, prior to administration of chemotherapeutic medications.

C.6.2.15.5. PSYCHIATRIC RN (INPATIENT)

C.6.2.15.5.1. Successful completion of the 8 hour didactic Psychiatric Nursing Department orientation within 30 days following assignment.

C.6.2.15.5.2. Successful completion of the command medication administration PSI within 30 days following assignment.

C.6.2.15.5.3. Successful completion of the command venipuncture PSI within 30 days following assignment.

C.6.2.15.5.4. Successful completion of the Psychiatric Nursing Department medication test within 30 days following assignment.

C.6.2.15.5.5. Successful completion of the Psychiatric Nursing Department clinical knowledge competency assessment examination within 30 days following assignment.

C.6.2.15.5.6. Successful completion of the Psychiatric Care Course within 14 weeks following assignment.

C.6.2.15.6. LABOR & DELIVERY RN Additional qualifications for Labor And Delivery Room Registered Nurses:

C.6.2.15.6.1. Basic fetal monitoring certification prior to hire. Neonatal Advanced Life Support (NALS) certification within 6 months following employment.

C.6.2.15.6.2. Minimum of 2 years full-time experience within the last 3 years as an RN caring for Labor and Delivery patients in an acute care setting.

C.6.2.15.6.3. Successful completion of Labor and Delivery specific skills inventory within the first 20 shifts.

C.6.2.15.6.4. One year verifiable experience as both scrub and circulating obstetrical Operating Room nurse.

C.6.2.15.7. MATERNAL-INFANT RN. Additional qualifications for Maternal-Infant Unit Registered Nurses: (Applicable to personnel working in the Mother-Baby Couplet and Pre-Term Mother, and Fetal Assessment Unit).

C.6.2.15.7.1. Minimum of 3 years full time experience within the last 5 years as an RN in a high risk Labor and Delivery unit.

C.6.2.15.7.2. Successful completion of a post anesthesia care course/training program acceptable to the American Association of the Perianesthesia Society.

C.6.2.15.7.3. Level (v) Intravenous (IV) certification (specific to area assigned) within twenty shifts of starting work on this contract.

C.6.2.15.7.4. Basic fetal monitoring certification prior to hire. Neonatal Advanced Life Support (NALS) certification within 6 months following employment.

C.6.2.15.8. OPERATING ROOM RN (SSS/SDS)

C.6.2.15.8.1. Possess and maintain current certification in Advanced Cardiac Life Support (ACLS). ACLS certifications must be obtained within 60 days following performance under this contract at no expense to the government.

C.6.2.15.8.2. Successful completion of at least 12 classroom hours (contact hours/CEUs) of continuing education within the preceding 24 months which maintains skills and knowledge as an Operating Room RN.

C.6.2.15.9. PERIOPERATIVE AREA RN. Additional qualifications for Perioperative Area Registered Nurses: (Applicable to personnel working in the Main Operating Room (MOR), Same-Day Surgery/Short-Stay Surgery (SDS/SSS) and the Post Anesthesia Care Unit (PACU).

C.6.2.15.9.1. Must have at least 1 year of full-time experience within the last 3 years as an RN caring for patients in a perioperative setting.

C.6.2.16. OUTPATIENT RN

C.6.2.16.1. AMBULATORY CARE CLINIC RN. Additional qualifications of Registered Nurses assigned to Ambulatory Care Clinics (Applicable to personnel working in the following clinics: Pre-Op Anesthesia, Orthopedic, Neurology, Urology, Otolaryngology, MRI/Angiography, Ophthalmology, Blood Bank, Plastic Surgery, Pediatric, Medical, and Surgery Clinics)

C.6.2.16.1.1. Maintenance of current PALS certification and ALS certification as applicable to JCAHO competency requirements for ambulatory care setting.

C.6.2.16.1.2. Possess 2 years of full-time experience (40 hours per week) in professional nursing practice within the last 3 years.

C.6.2.16.1.3. Successful completion of a preceptorship with an MTF nurse.

C.6.2.16.1.4. Demonstrates competency in providing nursing care for conscious sedation patients of all ages with medical and/or surgical problems as applicable in the ambulatory setting. Demonstrates continual assessment of patients for potential of life threatening crisis during these procedures.

C.6.2.16.1.5. Demonstrates competency as circulator or recovery nurse for surgical procedures performed in the ambulatory clinics as applicable.

C.6.2.16.2. BLOOD BANK RN. See Ambulatory Care Clinic qualifications given above.

C.6.2.16.3. ENDOCRINE/INFERTILITY RN. Additional qualifications for Registered Nurses assigned to the Endocrine/Infertility clinic:

C.6.2.16.3.1. Minimum of 3 years full-time experience in the last 5 years in the field of Endocrinology/ Infertility.

C.6.2.16.4. FAMILY PRACTICE/PRIMARY CARE RN

C.6.2.16.4.1. One year of full time experience as a Registered Nurse within the last 3 years in a primary care setting.

C.6.2.16.4.2. Current certification in Basic Life Support (BLS).

C.6.2.16.5. FORENSIC RN. Additional qualifications of Registered Nurses assigned to the GYN-Oncology clinic:

C.6.2.16.5.1. Possess a baccalaureate degree in nursing from an accredited college or university.

C.6.2.16.5.2. Possess current certification as a Pediatric Nurse Practitioner or obtain certification within 6 months after task order award.

C.6.2.16.5.3. Possess 1 year of full-time experience in forensic nursing or child abuse-related work within the last 3 years.

C.6.2.16.5.4. Possess past clinical nursing experience in pediatrics within the last 5 years.

C.6.2.16.5.5. Possess past experience with clinical research methodologies, quality assurance techniques, courtroom procedures, and nursing management.

C.6.2.16.6. GYN-ONCOLOGY RN. Additional qualifications of Registered Nurses assigned to the GYN-Oncology clinic:

C.6.2.16.6.1. Certification by the Oncology Nursing Certification Corporation.

C.6.2.16.6.2. Minimum of 3 years full-time progressive oncology experience within the last 4 years.

C.6.2.16.6.3. Knowledge of various neoplastic states and associated pathophysiology, oncology nursing practices and principles, and treatment modalities.

C.6.2.16.6.4. Documented certification and competency in chemotherapy administration.

C.6.2.16.7. LACTATION CONSULTANT RN. Additional qualifications of Registered Nurses assigned to the Lactation Consultant clinic:

C.6.2.16.7.1. Certification by the International Board of Lactation Consultant Examiners (I.B.L.C.E.).

C.6.2.16.7.2. Minimum of 2 years experience within the last 5 years working with childbearing families or maternal health nursing.

C.6.2.16.7.3. Skill in operating specialized medical equipment such as breast pump and alternate feeding devices.

C.6.2.16.8. MRI/ANGIOGRAPHY RN. See Ambulatory Care Clinic qualifications given above.

C.6.2.16.9. NEUROLOGY RN. See Ambulatory Care Clinic qualifications given above.

C.6.2.16.10. OB/GYN RN. See Ambulatory Care Clinic qualifications given above.

C.6.2.16.11. OPHTHALMOLOGY RN. See Ambulatory Care Clinic qualifications given above.

C.6.2.16.12. ORTHOPEDIC RN. See Ambulatory Care Clinic qualifications given above.

C.6.2.16.13. OSTOMY RN. Additional qualifications of Registered Nurses assigned to the Ostomy clinic:

C.6.2.16.13.1. Current certification as an enterostomal therapist.

C.6.2.16.13.2. Evidence of continuing nursing education which maintains skills and knowledge in the specialty of enterostomal therapy.

C.6.2.16.14. OTOLARYNGOLOGY RN. See Ambulatory Care Clinic qualifications given above.

C.6.2.16.15. PEDIATRIC ONCOLOGY RN. Additional qualifications of Registered Nurses assigned to the pediatric oncology clinic:

C.6.2.16.15.1. Minimum of 3 years full time progressive pediatric oncology experience within the last 4 years.

C.6.2.16.15.2. Knowledge of various neoplastic states and associated pathophysiology, oncology nursing practices and principles, and treatment modalities.

C.6.2.16.15.3. Documented certification and competency in chemotherapy administration.

C.6.2.16.16. PEDIATRIC RN. See Ambulatory Care Clinic qualifications given above.

C.6.2.16.17. PLASTIC SURGERY RN. See Ambulatory Care Clinic qualifications given above.

C.6.2.16.18. PRE-OP ANESTHESIA RN. See Ambulatory Care Clinic qualifications given above.

C.6.2.16.19. PSYCHIATRIC RN. See Psychiatric {Inpatient} qualifications given above.

C.6.2.16.20. RADIATION ONCOLOGY RN. Additional qualifications of Registered Nurses assigned to the Radiation Oncology Clinic:

C.6.2.16.20.1. Chemotherapy certification to include:

C.6.2.16.20.1.1. Knowledge of the nursing theory and principles relative to the care of patients with cancer.

C.6.2.16.20.1.2. In-depth knowledge of radiation therapy and its potential acute and long-term side effects.

C.6.2.16.20.1.3. In-depth knowledge of chemotherapeutic drugs, their side effects, and interactions with x-ray therapy.

C.6.2.16.20.1.4. In-depth knowledge of radiation therapy protocols.

C.6.2.16.20.1.5. Knowledge and skill in dealing with the psychosocial problems related to patients undergoing diagnosis and treatment of malignancies in inpatient and outpatient setting.

C.6.2.16.20.1.6. Skill in administering chemotherapeutic drugs, chemotherapy spill information and protocols, and disinfectant cleaning products.

C.6.2.16.21. TRIAGE/EMERGENCY DEPARTMENT RN. Additional qualifications of Registered Nurses assigned to the Emergency Department:

C.6.2.16.21.1. Minimum of 2 years' full-time experience within the last 3 years as an RN caring for patients in at least a

Level II emergency room setting.

C.6.2.16.21.2. Current certification and maintenance of certification in Advanced Life Support (ALS). Certified Emergency Nurse (CEN) and Critical Care Registered Nurse (CCRN) certification preferred. Pediatric Advanced Life Support (PALS) preferred.

C.6.2.16.21.3. Evidence of ABG certification prior to performing the task.

C.6.2.16.22. UROLOGY RN. See Ambulatory Care Clinic qualifications given above.

C.6.2.17. CASE MANAGER

C.6.2.17.1. A Baccalaureate Degree in Nursing and at least 3 years experience in the appropriate required discipline (research, health education, case management, women's health, or oncology).

C.6.2.17.2. Possess and maintain a valid unrestricted license to practice as a Registered Nurse in any 1 of the 50 states, the District of Columbia, the Commonwealth of Puerto Rico, Guam, or the U.S. Virgin Islands. The health care worker is responsible for complying with all applicable licensing regulations. Additionally, health care workers licensed outside of the 50 States must provide proof of having successfully passed the National Council Licensure Exam (NCLEX).

C.6.2.17.3. Certification as a case manager

- OR -

at least 2 years experience as a case manager.

C.6.2.17.4. Experience with information systems, data collection, and analysis.

C.6.2.17.5. Three letters of recommendation written within the last 3 years from 3 practicing physicians or nurse supervisors attesting to the health care worker's clinical skills. Reference letters must include name, title, phone number, date of reference, address and signature of the individual providing reference.

C.6.2.18. CHARGE NURSE

C.6.2.18.1. Meet all requirements for Registered Nurse given above.

C.6.2.18.2. Possess not less than 1 year of full-time experience within the last 3 years as a Registered Nurse in a family practice setting.

C.6.2.19. HEALTH EDUCATOR

C.6.2.19.1. Baccalaureate Degree in Health Education, Community/Public Health or Wellness, or a human services related field such as counseling or psychology.

C.6.2.19.2. At least 1 year of full-time experience in health promotion programming within the last 3 years.

C.6.2.20. RADIOLOGY RN

C.6.2.20.1. Meet all requirements for Registered Nurse given above.

C.6.2.20.2. Graduation from an accredited school of nursing.

C.6.2.20.3. One year of full-time experience as a Registered Nurse within the last 3 years in a radiology environment of comparable scope to include: assisting with specialized radiology procedures such as mammography needle biopsies; invasive and telemetry patient monitoring, consistent with conscious sedation monitoring; and intensive care life-support.

C.6.2.20.4. Current certification in American Heart Association Basic Life Support (BLS) for Healthcare Providers; American Heart Association Healthcare Provider Course; American Red Cross CPR (Cardio Pulmonary Resuscitation) for the Professional Rescuer; or equivalent.

C.6.3. LICENSED PRACTICAL NURSE

C.6.3.1. Graduation from an accredited Licensed Practical Nurse or Licensed Vocational Nurse Program.

C.6.3.2. A current, unrestricted license to practice as an LVN/LPN in any 1 of the 50 States, the District of Columbia, the Commonwealth of Puerto Rico, Guam or the U.S. Virgin Islands.

C.6.3.3. Prior to commencing service under this contract, Licensed Practical (Vocational) nurses must attend a 2-hour lecture on IV certification. Contractor nurses must then obtain certifications (e.g., IV, medications and blood administration) in accordance with clinic nursing service and command policy not later than 60 days after commencement of services, including MTF observation of 3 completed IV sticks.

C.6.4. CERTIFIED NURSING ASSISTANT

C.6.4.1. High school diploma or GED certificate.

C.6.4.2. Completion of a course of education leading to, and possession of, a certification as a nursing assistant.

C.6.5. CARDIAC TECHNOLOGIST

C.6.5.1. Possess high school diploma or GED certificate.

C.6.5.2. Completion of a course of education leading to, and possession of, a certification as a cardiac technologist.

C.6.5.3. Possess American Registry of Radiological Technologist (ARRT) certification.

C.6.5.4. Possess current CPR certification.

C.6.5.5. Possess a minimum of 1 year experience within the preceding 3 years.

C.6.6. CARDIOVASCULAR TECHNOLOGIST

C.6.6.1. Possess high school diploma or GED certificate.

C.6.6.2. Graduate from a program for Cardiac Sonographers accredited by the Joint Review Committee on Education in Diagnostic Medical Sonography.

C.6.6.3. Possess current certification as a Cardiac Sonographer from the American Registry of Diagnostic Medical Sonographers.

C.6.6.4. Possess current CPR certification.

C.6.6.5. Possess a minimum of 1 year experience within the preceding 3 years.

C.6.7. DIETETIC TECHNICIAN

C.6.7.1. Possess Associate Degree in Dietetic Technology from a school accredited by the American Dietetics Association (ADA) or have completed a dietetic technician program approved by the Commission on Accreditation/Approval for Dietetics Education (CAADE) of the ADA.

C.6.7.2. Possess a minimum of 1 year experience within the preceding 3 years.

C.6.8. ECHOCARDIOGRAPHIC TECHNICIAN

C.6.8.1. Two years of college, preferably with courses in physiology, anatomy, psychology and electronics, and 3 years of experience in Echocardiographic technology; or an equivalent combination of education and experience; and knowledge and abilities essential to the successful performance of the duties assigned to the position.

C.6.9. ELECTROCARDIOGRAPH TECHNICIAN (EKG)

C.6.9.1. Possess high school diploma or GED certificate.

C.6.9.2. Successful completion of a course of education leading to, and possession of, a certification as an Electrocardiograph Technician.

C.6.9.3. Possess certification by the National Alliance of Cardiovascular Technologists or the American Cardiology Technologists Association.

C.6.9.4. Possess 2 years of experience within the last 4 years as an Electrocardiograph Technician.

C.6.10. ELECTROENCEPHALOGRAPHIC TECHNICIAN (EEG)

C.6.10.1. Possess current registration as a Registered Polysomnographic Technologist (RPSGT) as determined by the "Board of Polysomnographic Technologists.

C.6.10.2. Possess current Registration as an Electroencephalographic Technologist as determined by the American Board of Registration of Electroencephalographic and Evoked Potential Technologists.

C.6.11. EMERGENCY MEDICAL TECHNICIAN

C.6.11.1. Possess a high school diploma or GED certificate.

C.6.11.2. Possess certification as an EMT-A by the National Registry of Emergency Medical Technicians or state EMT certification.

C.6.11.3. Possess a minimum of 1 year experience within the preceding 3 years.

C.6.12. HEMODIALYSIS TECHNICIAN

C.6.12.1. Possess proof of formal (i.e. medical facility or technical school based) training as a dialysis technician and at least 12 months experience within the preceding 36 months

– OR –

Possess proof of a current, unrestricted license to practice as an LVN/LPN in any 1 of the 50 States, the District of Columbia, the Commonwealth of Puerto Rico, Guam or the U.S. Virgin Islands and experience providing dialysis services for at least 12 months within the preceding 36 months. The health care worker is responsible for complying with all applicable state licensing regulations.

C.6.12.2. Possess proof of state certification or licensure as a Hemodialysis technician.

C.6.13. MEDICAL ASSISTANT

C.6.13.1. Possess high school diploma or GED certificate.

C.6.13.2. Successful completion of a course of education leading to, and possession of, certification as a medical assistant.

C.6.14. OCCUPATIONAL THERAPIST AIDE

C.6.14.1. Graduate of an occupational therapy assistant program accredited by the American Occupational Therapy Association (AOTA) or 1 of the 50 states.

C.6.14.2. Possess and maintain a valid license or certificate to practice as an occupational therapy assistant in any of the 50 states, District of Columbia, the Commonwealth of Puerto Rico, Guam or the U.S. Virgin Islands. The health care worker is responsible for complying with all applicable state licensing and/or certification regulations.

C.6.14.3. Possess Certified Occupational Therapy Assistant certification as determined by the National Board for Certification of Occupational Therapy.

C.6.14.4. Possess a minimum of 1 year experience within the preceding 3 years.

C.6.15. OPHTHALMIC TECHNICIAN

C.6.15.1. Possess high school diploma or GED certificate.

C.6.15.2. Certified as an Ophthalmic Technician by the Joint Commission on Allied Health Personnel in Ophthalmology (JCAHPO) preferred (including: successful completion of JCAHO accredited institutional course and minimum 2 years full-time supervised work experience and successful completion of written exam)

– OR –

in lieu of certification a minimum of 2 years full-time experience as an Ophthalmic Technician in a Hospital Department of Ophthalmology or private ophthalmology practice.

C.6.16. OPTICAL TECHNICIAN

C.6.16.1. Possess high school diploma or GED certificate.

C.6.16.2. Possess 1 year of school (military, trade school, or college) studying optical systems

– OR –

1 year of demonstrated work experience on optical systems.

C.6.17. OPTICIAN

C.6.17.1. Possess either experience as a health care technician (Dispensing Optician) of at least 24 months within the preceding 36 months which includes, but is not limited to, dispensing, adjusting, repairing eyewear; contact lens handling, care, insertion and removal

– OR –

current state licensure or certification as an optician.

C.6.17.2. Possess a minimum of 1 year experience within the preceding 3 years.

C.6.18. ORTHOPEDIC TECHNOLOGIST

C.6.18.1. Possess high school diploma or GED certificate.

C.6.18.2. At least 12 months experience within the preceding 36 months as an Orthopedic Technologist.

C.6.19. PERFUSIONIST

C.6.19.1. Graduate of an accredited cardiovascular perfusion education program accredited by the Committee on Allied Health Education and Accreditation (CAHEA).

C.6.19.2. Possess certification in Clinical Perfusion by the American Board of Cardiovascular Perfusion.

C.6.19.3. Possess documentation of a minimum of 75 clinical perfusions performed within the preceding 36 months.

C.6.20. PHLEBOTOMIST

C.6.20.1. Possess either a degree or certificate of graduation from an approved/accredited phlebotomy training program

– OR –

6 months experience as a Phlebotomist within the past 24 months.

C.6.20.2. Possess a minimum of 1 year experience within the preceding 3 years.

C.6.21. PHYSICAL THERAPY ASSISTANT

C.6.21.1. Be a graduate of a physical therapy assistant program accredited by the American Physical Therapy Association (APTA).

C.6.21.2. Possess and maintain a valid license or certificate to practice as a physical therapy assistant in any of the 50 states, District of Columbia, the Commonwealth of Puerto Rico, Guam or the U.S. Virgin Islands. The health care worker is responsible for complying with all applicable state licensing and/or certification regulations.

C.6.21.3. Possess a minimum of 1 year experience within the preceding 3 years.

C.6.22. PSYCHIATRIC TECHNICIAN

C.6.22.1. Possess current certification as a Psychiatric Technician by the American Association of Psychiatric Technicians

– OR –

Possess a current, unrestricted license to practice as an LPN/LVN in any 1 of the 50 States, the District of Columbia, the Commonwealth of Puerto Rico, Guam or the U.S. Virgin Islands. Additionally, health care workers licensed outside of the 50 States must provide proof of having successfully passed the Licensed Practical Nurse National Council Licensure Exam (LPNCLEX) AND current state or national certification in the subspecialty of psychiatry

– OR –

Possess current state licensure or certification as a Psychiatric Technician.

C.6.22.2. Possess at least 12 months experience within the preceding 24 months as a Psychiatric Technician or LPN.

C.6.23. SURGICAL/OPERATING ROOM TECHNICIAN

C.6.23.1. Possess either proof of graduation from an Operating Room technician training program acceptable by the government

– OR –

possess a current, unrestricted license to practice as an LVN/LPN in any 1 of the 50 States, the District of Columbia, the Commonwealth of Puerto Rico, Guam or the U.S. Virgin Islands.

C.6.23.2. Possess experience as a Surgical/Operating Room Technician or as an LPN providing Surgical/Operating Room services of at least 12 months within the preceding 36 months. Scrubbing experience must include competency in multiple surgical specialties, including at least 2 major complex specialties (orthopedics, neurosurgery, laparoscopy, cardio-thoracic.)

C.7. DUTIES

Contractor personnel shall perform all duties consistent with their education, training, experience, clinical privileges (as applicable), and their assigned position. This section specifies duties that apply to all personnel, duties that apply to groups of personnel, and duties that apply to specific labor categories. Additional duties, such as on-call duties or hospital admissions, specific to a particular Task Order are contained in that Task Order. Positions for which duties are given are as follows:

Mid Levels

- Dietician
- Nurse Practitioner
 - Anesthetist
 - Family
 - Midwife
 - Pediatrics
 - Women's Health
- Occupational Therapist
- Optometrist
- Physical Therapist
- Physician Assistant
- Podiatrist
- Speech Pathologist

Nursing

Registered Nurses

- Critical Care
 - CCU
 - ICU
 - NICU
 - PACU
 - PICU
 - Step-Down
 - Telemetry
- Medical/Surgical
 - Oncology
 - Psychiatric (Inpatient)
- Labor & Delivery
 - Maternal-Infant Unit
- Operating Room
 - Perioperative Area
 - SSS/SDS
- Outpatient
 - Ambulatory Care Clinics
 - Blood Bank
 - Endocrine/Infertility
 - Family Practice/Primary Care
 - Forensic
 - GYN-Oncology

- Lactation Consultant
- MRI/Angiography
- Neurology
- OB/GYN
- Ophthalmology
- Orthopedics
- Ostomy
- Otolaryngology
- Pediatric Oncology
- Pediatrics
- Plastic Surgery
- Pre-Op Anesthesia
- Psychiatric
- Radiation Oncology
- Triage/ER
- Urology
- Case Manager
- Charge Nurse
- Health Educator
- Radiology
- LPN
- CNA

Technicians/Other

- Cardiac Technologist
- Cardiovascular Technologist
- Dietetic Technician
- Echocardiographic Technician
- Electrocardiograph Technician (EKG)
- Electroencephalographic Technician (EEG)
- EMT-A
- Hemodialysis Technician
- Medical Assistant
- Occupational Therapist Aide
- Ophthalmic Technician
- Optical Technician
- Optician
- Orthopedic Technologist
- Perfusionist
- Phlebotomist
- Physical Therapy Assistant
- Psychiatric Technician
- Surgical/OR Technician

C.7.1. Duties that apply to all contractor personnel are as follows:

C.7.1.1. Maintain a level of productivity comparable with that of other individuals performing similar services.

C.7.1.2. Comply with the standards of the Joint Commission, applicable provisions of law, and the rules and regulations of any and all governmental authorities pertaining to licensure and regulation of healthcare personnel and medical treatment facilities, the regulations and standards of medical practice of the MTF and the bylaws of the MTF's medical staff. Adhere to and comply with all Department of the Navy, Bureau of Medicine and Surgery and local instructions and notices which may be in effect during the term of the contract.

C.7.1.3. Participate in the Command's Bloodborne Pathogen Program, including orientation, annual training, and exposure procedures.

C.7.1.4. Comply with the CDC's "Universal Precautions" for prevention of the transmission of HIV.

C.7.1.5. Practice aseptic techniques as necessary.

C.7.1.6. Function with an awareness and application of safety procedures.

C.7.1.7. Maintain an awareness of responsibility and accountability for own professional practice

C.7.1.8. Participate in continuing education to meet own professional growth.

C.7.1.9. Attend annual renewal of hospital provided annual training such as family advocacy, disaster training, infection control, sexual harassment, and bloodborne pathogens.

C.7.1.10. Participate in monthly meetings to review and evaluate the care provided to patients, identify opportunities to improve the care delivered, and recommend corrective action when problems exist.

C.7.1.11. Attend and participate in various meetings as directed.

C.7.1.12. Use computerized systems such as CHCS, ADS, and Clinical Information System (CIS).

C.7.1.13. Perform administrative duties which include maintaining statistical records of your workload, operating and manipulating automated systems such as Composite Health Care System (CHCS), participating in education programs, and participating in clinical staff quality assurance functions and Process Action Teams, as prescribed by the Commanding Officer.

C.7.2. Additional duties that apply to physicians, physician extenders, and nurses are as follows:

C.7.2.1. Participate in the provision of in-service training to clinic staff members.

C.7.2.2. Demonstrate awareness and sensitivity to patient/significant others' rights, as identified within the institution.

C.7.2.3. Apply an awareness of legal issues in all aspects of patient care and strive to manage situations in a reduced risk manner.

C.7.2.4. Participate in the implementation of the Family Advocacy Program as directed. Participation shall include, but not be limited to, appropriate medical examination, documentation, and reporting.

C.7.2.5. Participate in peer review and performance improvement activities.

C.7.2.6. Demonstrate appropriate delegation of tasks and duties in the direction and coordination of health care team members, patient care, and clinic activities.

C.7.2.7. Provide training and/or direction as applicable to supporting Government employees (e.g., hospital corpsmen, students, etc.).

C.7.2.8. Perform efficiently in emergency patient situations following established protocols, remaining calm, informing appropriate persons, and documenting events.

C.7.2.9. Perform timely, accurate, and concise documentation of patient care.

C.7.3. Additional duties that apply to physicians and physician extenders are as follows:

C.7.3.1. Provide on-call services as specified in the task order.

C.7.3.2. Provide patient admission services as specified in the task order.

C.7.3.3. Provide service as a Primary Care Manager (PCM) for enrolled patients, as assigned.

C.7.4. Additional duties specific to each labor category in this contract are as follows:

C.7.4.1. DIETICIAN

C.7.4.1.1. Nutritional assessment, evaluation, and modification of nutrients to include:

C.7.4.1.1.1. Interpretation of laboratory data.

C.7.4.1.1.2. Evaluation of diet history, 24-hour recall, and food frequency data.

C.7.4.1.1.3. Modifications in fiber, consistency, calories, carbohydrates, fats, proteins, and minerals.

C.7.4.1.1.4. Food allergy or intolerance and for alternate dietary plans such as vegetarianism.

C.7.4.1.1.5. Nutritional factors associated with obesity, diabetes, cancer, cardiac, gastrointestinal, hepatic, hypertension, metabolic, endocrine, renal, surgery, neurologic, pulmonary, malabsorption, and infection.

C.7.4.1.1.6. All life cycle phases (e.g., pregnancy, lactation, infants, children, adolescents, adults, and geriatrics).

C.7.4.1.1.7. Disease prevention of palliation (e.g., dental caries, oral health, weight control, risk factor intervention, oncology, abnormalities of nutrient metabolism, drug-nutrient and diet-drug interactions, substance abuse, and feeding problems).

C.7.4.1.1.8. Nutritional factors associated with stress, deficiency states, immunologic implication, megavitamin supplementation.

C.7.4.1.1.9. Education of patient and family in lifestyle modifications for above.

C.7.4.1.1.10. Liaison between physician, nursing care, and nutritional services.

C.7.4.2. NURSE PRACTITIONER

C.7.4.2.1. Adhere to NAVMEDCOMINST 6550.4, Utilization Guidelines for Nurse Practitioners (current version). This instruction includes the following requirements: permits Nurse Practitioner ordering and administration of an approved list of drugs according to protocol and requires random review of records of patients seen by the Nurse Practitioner.

C.7.4.2.2. NURSE PRACTITIONER, ANESTHETIST

C.7.4.2.2.1. Provide a full range of Anesthetist Nurse Practitioner services in accordance with privileges granted by the Commanding Officer (e.g., evaluate and counsel patients preoperatively and formulate an anesthesia care plan, to include post operative evaluation.).

C.7.4.2.2.2. Obtain a complete health history including psychosocial as well as biophysical aspects.

C.7.4.2.2.3. Conduct a complete physical screening assessment utilizing techniques of observation, inspection, auscultation, palpitation, and percussion as well as proper use of instruments to aid in the evaluation.

C.7.4.2.2.4. Request and evaluate pertinent laboratory studies, pulmonary function studies, including blood gases, respiratory therapy, and other appropriate studies under established protocol.

C.7.4.2.2.5. Select and administer pre-anesthetic medication according to established protocol.

C.7.4.2.2.6. Select of anesthetic agent and technique with an appropriate concurrence.

C.7.4.2.2.7. Administer of a full range of anesthesia to pediatric and adult patients for a full range of surgical specialties, including provision of regional anesthesia for intraoperative and postoperative analgesia.

C.7.4.2.2.8. Perform supportive life functions, including intratracheal intubation, management of blood, fluid, and electrolyte loss and replacement in maintenance of cardiovascular and respiratory functions.

C.7.4.2.2.9. Recognize abnormal patient response to anesthesia or to and adjunctive medication of other form of therapy, and take corrective action including the requesting of consultation whenever necessary.

C.7.4.2.2.10. Provide professional observation and resuscitative care and request consultation whenever appropriate during the post-operative period.

C.7.4.2.2.11. Insert intravenous catheters, including central venous access lines under medical supervision.

C.7.4.2.2.12. Perform intratracheal intubation and extubation.

C.7.4.2.2.13. Insert arterial catheters, for pressure monitoring an arterial blood sampling.

C.7.4.2.2.14. Utilize all current techniques in monitoring.

C.7.4.2.2.15. Perform regional anesthetic techniques for surgical procedures and post-operative pain management including but not limited to spinal, epidural, brachial plexus, femoral, and sciatic blocks.

C.7.4.2.2.16. Select and administer anesthetic techniques, medications and adjunct drugs appropriate to the individual patient within established protocols.

C.7.4.2.2.17. Identify and manage emergency situations including assessment of adequacy of recovery or antagonism of muscle relaxants, narcotics, and other agents, and implement appropriate management techniques.

C.7.4.2.2.18. Manage fluid, blood, and electrolyte therapy within a medical care plan.

C.7.4.2.2.19. Initiate and modify therapies, including drug and pain therapy within established protocols.

C.7.4.2.2.20. Discharge patient from the Recovery Room according to established protocols.

C.7.4.2.2.21. Provide consultation, management, and implementation of respiratory and ventilatory care.

C.7.4.2.3. NURSE PRACTITIONER, FAMILY PRACTICE

C.7.4.2.3.1. Provide a full range of Family Nurse Practitioner services in accordance with privileges granted by the Commanding Officer (e.g., supervise and provide general screening and medical care and examinations of patients for routine, acute and chronic conditions involving any and all organ systems; provide immunizations; diagnose, treat, and counsel patients as indicated).

C.7.4.2.3.2. Treat patients with common acute conditions, illnesses, or minor trauma within accepted protocols, Nurse Practice Acts, and/or in collaboration with a physician.

C.7.4.2.3.3. Collaborate with the physician in the health care of patients with chronic illnesses.

C.7.4.2.3.4. Request consultation or referral with appropriate physicians, clinics, or other health resources as indicated.

C.7.4.2.3.5. Order diagnostic tests as applicable.

C.7.4.2.3.6. Prescribe and dispense medications as delineated by the Pharmacy and Therapeutics Committee.

C.7.4.2.3.7. Promote preventive and health maintenance care, including annual physicals, positive health behaviors, and self-care skills through education and counseling.

C.7.4.3. NURSE PRACTITIONER, MIDWIFE

C.7.4.3.1. Provide a full range of women's health services (e.g., obtain health, psychosocial, and obstetric gynecological histories; perform health screening and physical examinations with specific emphasis on evaluation of thyroid, breasts, abdomen, and pelvis; provide contraceptive counseling and family planning; clinical management of minor gynecological problems and sexually transmitted diseases; request laboratory studies, etc.) .

C.7.4.3.2. Provide ambulatory prenatal care; assess and treat antepartum obstetrical patients with complications after consultation with physician; and provide ambulatory post partum care.

C.7.4.3.3. Perform a variety of gynecological/obstetrical procedures (e.g., colposcopy; cervical and endocervical biopsy; cryosurgery; endometrial biopsy; ultrasonography Level I, etc.)

C.7.4.3.4. Provide counseling to patients with common marital or family problems.

C.7.4.3.5. Request consultation or referral with appropriate physicians, clinics, or other health resources as indicated.

C.7.4.4. NURSE PRACTITIONER, PEDIATRICS

C.7.4.1. Provide a full range of Pediatric Nurse Practitioner services in accordance with privileges granted by the commanding officer (e.g., supervise and provide general screening and medical care and examinations for routine, acute and chronic conditions involving any and all organ systems; provide immunizations; diagnose, treat, and counsel, developmental and learning disabilities (cerebral palsy, mental retardation, birth defects, ADHD, emotional problems and adjustments, and child abuse and neglect; etc.)).

C.7.4.2. Treat patients with common acute conditions, illnesses, or minor trauma within accepted protocols, Nurse Practice Acts, and/or in collaboration with a physician.

C.7.4.3. Collaborate with the physician in the health care of patients with chronic illnesses.

C.7.4.4. Request consultation or referral with appropriate physicians, clinics, or other health resources as indicated.

C.7.4.5. Order diagnostic tests as applicable.

C.7.4.6. Prescribe and dispense medications as delineated by the Pharmacy and Therapeutics Committee.

C.7.4.7. Promote preventive and health maintenance care, including annual physicals, positive health behaviors, and self-care skills through education and counseling.

C.7.4.5. NURSE PRACTITIONER, WOMEN'S HEALTH

C.7.4.5.1. Provide a full range of women's health services (e.g., obtain health, psychosocial, and obstetric gynecological histories; perform health screening and physical examinations with specific emphasis on evaluation of thyroid, breasts, abdomen, and pelvis; provide contraceptive counseling and family planning; clinical management of minor gynecological problems and sexually transmitted diseases; request laboratory studies, etc.).

C.7.4.5.2. Provide ambulatory prenatal care; assess and treat antepartum obstetrical patients with complications after consultation with physician; and provide ambulatory post partum care.

C.7.4.5.3. Perform a variety of gynecological/obstetrical procedures (e.g., colposcopy; cervical and endocervical biopsy; cryosurgery; endometrial biopsy; ultrasonography Level I, etc.).

C.7.4.5.4. Provide counseling to patients with common marital or family problems.

C.7.4.5.5. Request consultation or referral with appropriate physicians, clinics, or other health resources as indicated.

C.7.4.5.6. Prescribe and dispense medications as delineated by the Pharmacy and Therapeutics Committee.

C.7.4.5.7. Promote preventive and health maintenance care, including annual physicals, positive health behaviors, and self-care skills through education and counseling.

C.7.4.5.8. Demonstrate appropriate delegation of tasks and duties in the direction and coordination of health care team members, patient care, and clinic activities.

C.7.4.5.9. Provide training and/or direction as applicable to supporting Government employees (i.e., hospital corpsmen, students, etc.) assigned to you during the performance of duties.

C.7.5. OCCUPATIONAL THERAPIST

C.7.5.1.1. Comprehensive occupational therapy evaluation, planning, and treatment of all patients referred for:

C.7.5.1.1.1. Impaired range of motion, strength, endurance, and coordination.

C.7.5.1.1.2. Daily living and leisure skills.

C.7.5.1.1.3. Occupational behavior skills associated with psychosocial dysfunctions.

C.7.5.1.1.4. Cognitive impairments such as orientation, concentration, conceptualization, comprehension, and sensory.

C.7.5.1.1.5. Pediatric development screening.

C.7.5.1.1.6. Basic orthotics such as static hand splints, dynamic hand splints, and simple fracture bracing without hinges using low temperature plastics.

C.7.5.1.1.7. Energy conservation.

C.7.5.1.1.8. Joint protection and body mechanics.

C.7.5.1.1.9. Work tolerance.

C.7.5.1.1.10. Prosthetic training for upper extremities.

C.7.5.1.1.11. Adaptations to therapeutic equipment.

C.7.5.1.1.12. Pediatric play skills.

C.7.6. OPTOMETRIST. The health care worker shall:

C.7.6.1.1. Provide a full range and depth of optometric examinations in accordance with standards of the optometric profession. These examinations and the requisite testing shall provide and adequate diagnosis and disposition for each patient and shall include, at a minimum:

- Patient history to include chief complaint, date of last eye examination, medications and pertinent family and personal health history
- Measurement and verification of current lenses (as applicable)
- Visual acuity corrected or uncorrected including distance and near acuity
- An external examination to include cover test and pupils

- Phorias
- Tonometry
- Manifest refraction to include best corrected distance and near acuity recorded through manifest
- Bifocal power determination as applicable
- Ophthalmoscopy direct and/or indirect (as applicable)
- Keratometry if clinically indicated
- Completion of an eyeglass prescription
- Slit lamp biomicroscopy
- Any other procedures required in the clinical judgment of the optometrist and with the capability of the MTF.

Patient charts shall be legibly completed.

C.7.6.1.2. Specific medical surveillance testing for patients with laser, microwave or ionizing radiation exposure.

C.7.6.1.3. Fitting and measuring PD and bifocal segment heights for certain eyeglasses.

C.7.6.1.4. Report any observed pathology or unexplained loss of visual acuity including indications as to the limitations that exist and recommend additional appropriate care.

C.7.6.1.5. Report evidence that visual ability cannot be restored by means of eyeglasses to the level required by the patient's assigned job including indications as to the limitations that exist and recommendations for additional appropriate care.

C.7.6.1.6. Advise patients in the proper use and care of eyeglasses, patient education and instruction.

C.7.6.1.7. Verifying safety glasses if problem exists.

C.7.6.1.8. Coordinate consultations with the MTF and civilian practitioners.

C.7.6.1.9. Prescribe and dispense medications as delineated by the Pharmacy and Therapeutics Committee.

C.7.6.1.10. Supervise and teach other medical staff and provide educational lectures and participate in the provision of in-service training to clinic staff members. Such direction and interaction will adhere to government and professional clinical standards and accepted clinical protocol.

C.7.6.1.11. Participate in peer review and performance improvement activities.

C.7.6.1.12. Demonstrate appropriate delegation of tasks and duties in the direction and coordination of health care team members, patient care, and clinic activities.

C.7.6.1.13. Provide training and/or direction as applicable to supporting employees (e.g. NPs, medical assistants, RNs, LVNs, etc.) assigned to the health care worker during the performance of duties. Such direction and interaction will adhere to government and professional clinical standards and accepted clinical protocol.

C.7.7. PHYSICAL THERAPIST

C.7.7.1. Provide a full range of physical therapy services in accordance with privileges granted by the Commanding Officer (e.g., provide appropriate therapeutic procedures and provide a full range of therapy services on site in support of patient referrals).

C.7.7.2. Test and measure patient's strength, motor development, sensory perception, functional capacity, and respiratory and circulatory efficiency. Records findings to develop or revise treatment programs.

C.7.7.3. Plan and prepare written treatment programs based on evaluation of patient data.

C.7.7.4. Administer manual exercises to improve and maintain function.

C.7.7.5. Instruct, motivate, and assist patient in performing various physical activities, such as nonmanual exercises, ambulatory functional activities, daily-living activities, and in use of assistance and supportive devices, such as crutches, canes, and prostheses.

C.7.7.6. Administer treatments involving application of physical agents, using equipment such as hydrotherapy tanks and whirlpool baths, moist packs, ultraviolet and infrared lamps, and ultrasound machines. Evaluate effects of treatment at various stages and adjusts treatments to achieve maximum benefit.

C.7.7.7. Administer massage, applying knowledge of massage techniques and body physiology. Administer traction to relieve pain, using traction equipment.

C.7.7.8. Record treatment, response, and progress in patient's chart or CHCS.

C.7.7.9. Instruct patient and family in treatment procedures to be continued at home. Evaluate, fit, and adjust prosthetic and orthotic devices and recommend modification as required.

C.7.7.10. Coordinate treatment with physician and other staff members to obtain additional patient information, suggest revisions in treatment program, and integrate physical therapy treatment with other aspects of the patient's health care.

C.7.7.11. Maintain department equipment and supplies.

C.7.7.12. Orient, instruct, and direct work activities of assistants, aides, students, etc.

C.7.7.13. Contact referring physicians regarding patient care concerns, as required.

C.7.7.14. Provide documented treatment and discharge recommendations to members of the staff in routine, emergency and special cases as needed.

C.7.7.15. Provide periodic training/advice as required to promulgate the needs of the technicians.

C.7.7.16. Verify the content and correctness of all prepared and transcribed reports within 2 working days by affixing an original signature to all copies of the document and validating its content or by computer input as appropriate.

C.7.8. PHYSICIAN ASSISTANT

C.7.8.1. Provide a full range of physician assistant services in accordance with privileges granted by the Commanding Officer (e.g., supervise and provide general screening and medical care and examinations of patients for routine, acute and chronic conditions involving any and all organ systems; provide immunizations; diagnose, treat, and counsel patients as indicated).

C.7.8.2. Adhere to NAVMEDCOMINST 6550.5, Utilization Guidelines for Physician Assistants. This instruction includes the following requirements: permits physician assistant ordering and administration of an approved list of drugs according to protocol and requires random review of records of patients seen by the Physician Assistant.

C.7.8.3. Request consultation or referral with appropriate physicians, clinics, or other health resources as indicated.

C.7.8.4. Order diagnostic tests as applicable.

C.7.8.5. Prescribe and dispense medications as delineated by the Pharmacy and Therapeutics Committee.

C.7.8.6. Promote preventive and health maintenance care, including annual physicals, positive health behaviors, and self-care skills through education and counseling.

C.7.9. PODIATRIST

C.7.9.1. Provide a full range of podiatry services in accordance with privileges granted by the Commanding Officer (e.g., medical and surgical treatment of disorders of the foot and ankle with comprehensive and complete podiatric medical examination for consultation, diagnosis, and treatment planning).

C.7.9.2. Biomedical examination with fabrication or prescribing of orthotic and shoe appliances or devices, including design of special shoes.

C.7.9.3. Comprehensive joint and gait analysis as related to foot and ankle.

C.7.9.4. All dermatological diseases of the foot and ankle.

C.7.9.5. All circulatory disorders affecting the foot and ankle.

C.7.9.6. All neurological disorders affecting the foot.

C.7.9.7. Arthritis and other inflammatory diseases affecting the foot and ankle.

C.7.9.8. All toenail disorders.

C.7.9.9. Skin and soft tissues tumors and cysts of the foot.

C.7.9.10. Soft tissue surgery of the foot (including the skin and nails).

C.7.9.11. Digital osseous and soft tissue surgery, including the great toe.

C.7.9.12. Foot and ankle trauma (sprains, strains, contusions).

C.7.9.13. Skin and soft tissue biopsy of the foot and ankle.

C.7.9.14. Treatment of closed extremity dislocations or simple fractures of foot and ankle.

C.7.9.15. Diagnostic and therapeutic procedures.

C.7.9.16. Order x-rays of foot and ankle.

C.7.9.17. Order and interpret all appropriate laboratory studies in the practice of podiatric medicine and surgery.

C.7.9.18. Order and prescribe treatment by physical medicine and therapy.

C.7.9.19. Admin podiatric patients to the hospital for further treatment or surgery with cosignature by attending physician.

C.7.10. SPEECH PATHOLOGIST. The health care worker shall perform the following duties:

C.7.10.1. Provide a full range of speech pathology services in accordance with privileges granted by the Commanding Officer (e.g., evaluation, remediation, counseling, appropriate referral and management of all cases of speech, language, and voice disorders per current ASHA and applicable MTF guidelines).

C.7.10.2. Provide, upon physician referral, evaluation, and treatment programs for basic and more complicated communication disorders including: articulation, language, fluency, resonance phonatory, and neuromuscular problems.

C.7.10.3. Select, administer, and interpret commonly used diagnostic tests including vocabulary, articulation, and language batteries for adults and children.

C.7.10.4. Refer patients to physicians, audiologists, or other health care providers as appropriate.

C.7.10.5. Select appropriate laryngeal (nonvocal) communication devices.

C.7.11. REGISTERED NURSE

C.7.11.1. Perform a full range of Family Practice, Primary Care, or Emergency Department RN duties in accordance with assignment under the task order, including: triage; patient assessment and monitoring; use of patient monitoring and treatment equipment; appropriate nursing care, procedures, and treatments; execution of physicians' orders within the guidelines of standard nursing practice; documentation of patient care and observations; and patient education and emotional support.

C.7.11.2. Provide professional nursing care in a knowledgeable, skillful, consistent, and continuous manner.

C.7.11.3. Assess each patient and perform triage duties as assigned.

C.7.11.4. Formulate and carry out a goal directed plan of care which based on determined nursing diagnosis and patient outcomes and which is prioritized according to patient needs and available resources including time, personnel, equipment, and supplies.

C.7.11.5. Evaluate effectiveness of self care given by all health team members, and contribution of systems, environment, and instrumentation in progressing patient toward outcomes.

C.7.11.6. Provide treatment and discharge instructions upon patient release.

C.7.11.7. Perform assessment/data collection in an ongoing and systematic manner, focusing on physiological, psychological, and cognitive status.

C.7.11.8. Provide a safe and clean environment for each patient.

C.7.11.9. Ensure areas are stocked and properly equipped.

C.7.11.10. Identify patient/significant other learning needs and implement appropriate measures to meet identified needs.

C.7.11.11. Assist in planning, supervising and instructing LPNs/LVNs, nursing assistants and ancillary personnel.

C.7.12. CRITICAL CARE RN {CCU, ICU, MICU, NICU, PICU, STEP-DOWN, TELEMETRY}

C.7.12.1. Provides intensive nursing care to complex, critically ill patients. Continually assesses condition of 1 to 2 patients for potential or life threatening crisis.

C.7.12.2. Operates cardiac monitors and specialized unit equipment safely and effectively. Comprehends underlying principles of IABP and pacers. Interprets cardiac rhythms, determines implications of data and makes indicated interventions, including the provision of Advanced Life Support (ALS).

C.7.12.3. Safely administers prescribed medications to include IV push drugs and IV drips. Monitors and documents patient(s) responses(s) in a timely manner. Demonstrates ability to correctly integrate knowledge of drug actions with hemodynamic concepts.

C.7.12.4. Adeptly cares for patients on ventilators; can trouble shoot alarms/machines and recognize airway problems, initiates appropriate interventions. Understands ventilator concepts.

C.7.12.5. May provide care for Continuous Renal Replacement Therapy (CRRT) patients.

C.7.12.6. Recovers both stable and unstable patients of all ages from general and regional anesthesia (PACU only).

C.7.12.7. Provides intensive nursing care to complex critically ill patients appropriate to the specific unit. Continually assess condition of 1 to 2 patients for potential or life threatening crisis.

C.7.12.8. Operates hemodynamic monitors and specialized unit equipment safely and effectively.

C.7.12.9. Interprets cardiac rhythms and cardio-respiratory parameters, determines implications of data and makes indicated interventions, including the provision of Advanced Life Support. Comprehends underlying principles of pacemakers and Intra-aortic Balloon Pump therapy.

C.7.12.10. Safely administers prescribed medications to include IV push medications and infusions. Demonstrates ability to correctly integrate knowledge of drug actions with hemodynamic concepts. Monitors and documents patient responses in a timely manner.

C.7.12.11. Adeptly cares for patients on ventilators, identifies problems and initiates appropriate interventions.

C.7.12.12. Manages and assesses intra-cranial pressure monitoring data, integrates concepts of cerebral perfusion with data analysis, symptomatology and initiates appropriate nursing interventions.

C.7.13. NEONATAL INTENSIVE CARE UNIT (NICU) RN. Additional duties/responsibilities of NICU Registered Nurses:

C.7.13.1. Provides intensive care to critically ill neonatal patients with medical or surgical problems. Continually assesses condition(s) of patient(s) for potential or life threatening crisis.

C.7.13.2. Operates cardio-respiratory monitors and interprets cardiac rhythms and respiratory patterns, determines implications and takes indicated interventions. Documents all in a timely fashion.

C.7.13.3. Administer prescribed medications to include IV push drugs and IV drips. Monitors and documents patient response.

C.7.13.4. Cares for patients on ventilators with subsequent monitoring.

C.7.13.5. Operates hemodynamic equipment safely and effectively. Interprets generated data and responds appropriately.

C.7.13.6. Monitors the recovery of stable and unstable neonates from general and regional anesthesia.

C.7.13.7. Attends high risk deliveries and provides resuscitative measures to newborns as indicated.

C.7.13.8. May be requested to accompany patients to other hospitals via surface transport in compliance with Command protocols and policies. Transports may be "to" or "from" other hospitals.

C.7.14. PEDIATRIC AREA RN. Additional duties/responsibilities of pediatric area nurses: (Applicable to personnel working in the Pediatric Intensive Care Units (PICU)).

C.7.14.1. Provides intensive care nursing for critically ill pediatric patients with medical and/or surgical problems. Continually assesses condition(s) of patient(s) for potential or life threatening crises.

C.7.14.2. Operates cardiac monitors and interprets cardiac rhythms, determines implications and takes indicated actions. Documents in a timely fashion.

C.7.14.3. Administers prescribed medications to include IV push drugs and IV drips. Monitors and documents patient response.

C.7.14.4. Cares for patients on ventilators as well as pacemaker insertion and subsequent monitoring.

C.7.14.5. Operates hemodynamic equipment safely and effectively. Interprets generated data and responds appropriately.

C.7.14.6. Cares for dialysis patients.

C.7.14.7. Monitors the recovery of stable and unstable pediatric patients of all ages from general and regional anesthesia.

C.7.14.8. May be requested to accompany patients to other hospitals via land transport in compliance with Command policies and protocols. Transports may be "to" or "from" other hospitals.

C.7.14.9. Provides Pediatric Advanced Life Support (PALS) and Advanced Life Support (ALS) as needed.

C.7.15. TELEMETRY/STEP-DOWN UNIT RN. Additional duties/responsibilities of Registered Nurses assigned to the Telemetry/Step-Down Unit:

C.7.15.1. Provides nursing care and ongoing assessment to 1 to 4 patients requiring close monitoring for potential or life threatening crisis but do not require complex hemodynamic monitoring or ventilatory support.

C.7.15.2. Interprets cardiac rhythms, determines implications of data and initiates indicated interventions, including the provision of Advanced Life Support.

C.7.15.3. Recovers both stable and unstable patients of all ages from general and regional anesthesia.

C.7.15.4. Safely administers prescribed medications to include IV push drugs and infusions. Monitors and documents patient response in a timely manner. Demonstrates ability to correctly integrate knowledge of drug actions with hemodynamic/cardiac rhythm actions.

C.7.15.5. Operates monitoring systems and other specialized unit equipment safely and effectively.

C.7.16. MEDICAL/SURGICAL RN

C.7.16.1. ONCOLOGY RN

C.7.16.1.1. Nurses on the Oncology Unit shall administer Chemotherapy after receiving Chemotherapy Certification.

C.7.16.2. PSYCHIATRIC RN {Inpatient}

C.7.16.2.1. Applies in-depth knowledge of nursing theory and principles relative to the care of patients with complex psychiatric conditions, to include milieu therapy, group dynamics, use of psychotropic medications and crisis intervention.

C.7.16.2.2. Demonstrates a sound understanding and manages a therapeutic milieu; providing structure, social support, patient education, safety, and social skills training.

C.7.16.2.3. Participates in discharge planning utilizing available resources, to include rehabilitation as appropriate.

C.7.16.2.4. Assesses and intervenes in clinical situations (including suicidal, homicidal, or elopement behavior) that may require physical and/or pharmacological restraints to maintain a safe and therapeutic environment.

C.7.16.2.5. Follows Command and unit specific policies for Seclusion/Restraint, Elopement, ECT, and Management of the Assaultive Patient.

C.7.16.2.6. Obtains 12 lead EKGs, determines implications, and takes indicated actions.

C.7.16.2.7. Supervises, escorts, or acts as a therapeutic participant in patient activities both on and off the unit.

C.7.16.2.8. Liaisons with patient's military command as needed, communicating inpatient needs and outpatient discharge plans.

C.7.17. LABOR AND DELIVERY ROOM RN. Additional duties/responsibilities of the Labor and Delivery Room Registered Nurses:

C.7.17.1. Provides care to normal and high risk antepartal, intrapartal and postpartal patients. Recognizes changes in maternal, fetal or newborn infant condition that would constitute an emergency situation and responds appropriately.

C.7.17.2. Uses and interprets information from fetal monitoring equipment to include doptone, fetoscope, internal and external uterine and fetal monitoring.

C.7.17.3. Utilizes knowledge of normal and high risk maternal, fetal and infant nursing care requirements after delivery to provide anticipatory guidance and education to parents.

C.7.17.4. Possesses knowledge of normal and abnormal newborn physical and neurological development and application of same in delivery of nursing care to infants. Infants transition with mothers on the Labor & Delivery Suite.

C.7.17.5. Possesses knowledge of normal and abnormal female anatomy and physiology, common gynecological surgery and application of same in delivery of nursing care to obstetrical patients.

C.7.17.6. Safely administers drugs specific to pregnancy, labor and delivery, postpartum and neonatal care as described.

C.7.17.7. Assists in the performance and interpretation of the Non-Stress Test and Contraction stress Test. Administers and monitors pitocin infusions to induce or augment labor. Cares for patients undergoing amniocentesis.

C.7.17.8. Assists in both vaginal and scheduled or emergent Cesarean Section deliveries, and other operative procedures permitted by MTF policy. Performs scrub and circulating duties in the Labor and Delivery Operating Suite(s).

C.7.17.9. Monitors patients during the immediate post delivery period.

C.7.17.10. Possess knowledge of and/or experience working with intrathecal and epidural anesthesia.

C.7.18. MATERNAL-INFANT UNIT RN. Additional duties/responsibilities of the maternal-infant unit Registered Nurses:

C.7.18.1. Use and interprets information from fetal monitoring equipment to include doptone, fetoscope, and external uterine and fetal monitoring. Initiates appropriate response and documents in a timely fashion.

C.7.18.2. Provides care to normal and high risk antepartal patients, to include patients with pregnancy induced hypertension, preterm labor, diabetes, preclampsia and other pathological conditions of pregnancy. Recognize changes in maternal, fetal or newborn infant condition that would constitute an emergency situation and responds appropriately.

C.7.18.3. Possesses knowledge of normal and abnormal female anatomy and physiology, common gynecological surgery and application of same in delivery of nursing care to patients.

C.7.18.4. Cares for pre and post-operative OB-GYN patients. Provides family planning instruction as needed.

C.7.18.5. Provides care to antepartal and postpartal patients. Recognizes changes in maternal or newborn infant condition that would constitute an emergency situation and responds appropriately.

C.7.18.6. Operate and monitor the performance of essential equipment used in the care of stable newborns, e.g., radiant warmer, blood glucose monitor, pulse oximeter, medications via syringe pumps, etc. Interpret and respond to data generated by such equipment.

C.7.18.7. Utilizes knowledge of normal and high risk maternal and infant nursing care requirements after delivery to provide anticipatory guidance and education to parents.

C.7.18.8. Possesses knowledge of normal and abnormal newborn anatomy and physiology and neurological development and application of same in delivery of nursing care to newborn infants.

C.7.18.9. Monitors patients (both mother and infant(s)) during the postpartum period.

C.7.18.10. Participates in cross training to Labor and Delivery, Transitional/Newborn Nursery, Antepartum, Intrapartum, Post-partum, Operating Room, Post-anesthesia Care Unit, Pediatrics and Neonatal ICU as intradepartmental staffing may need supplementation.

C.7.18.11. Assess patient readiness for rooming-in, transfer to NICU, or discharge.

C.7.18.12. Safely administer prescribed medications including IV push drugs and IV drips specific to pregnancy, labor and delivery, postpartum and neonatal care as described. Monitors and documents patient response.

C.7.18.13. Administer oxygen therapy, monitor oxygen equipment, and interpret and respond to data. Monitor patient and interpret and respond to data.

C.7.18.14. Gavage feed infants as ordered.

C.7.18.15. Assist in the performance and interpretation of the non-stress test and contraction stress test. Administer and monitors pitocin infusions to induce or augment labor. Cares for patients undergoing amniocentesis.

C.7.18.16. Assist in both vaginal and scheduled or emergent cesarean section deliveries, and other operative procedures permitted by MTF policy. Perform circulating duties in the Maternal-Infant unit.

C.7.18.17. Recover both stable and unstable infants and patient of childbearing ages from general and regional anesthesia.

C.7.18.18. Identify potential post-anesthetic patient problems; specifically, airway management, hemodynamic instability and pain control, and intervene appropriately.

C.7.18.19. Provide ACLS or Neonatal Resuscitation Program (NRP) as indicated.

C.7.18.20. Operate cardiac monitors, interpret cardiac rhythms, determine implications, and make indicated interventions.

C.7.18.21. Possess knowledge of and/or experience working with intrathecal, epidural, and general anesthesia.

C.7.18.22. Participate in multi-disciplinary patient care rounds and provides anticipatory guidance and patient education to patients and their support individual(s).

C.7.18.23. Possess a functional knowledge of all available resources.

C.7.19. OPERATING ROOM RN. Applicable to personnel working in the Main Operating Room (MOR), Same Day Surgery/Short Stay Surgery (SDS/SSS) and the Post Anesthesia Care Unit (PACU).

C.7.19.1. Pre-admission: Confirms scheduled surgery date and procedure with the Main Operating Room, Checks procedure on consult against written consent form, ensures surgical checklist is completed. Makes pre-op telephone call to client to confirm arrival time and re-enforces physician/anesthesia instructions. Provides any pre-op teaching, post procedure transportation arrangements or significant other teaching.

C.7.19.2. Confers with surgeon on procedures concerning instruments, sutures, and equipment, assuring all prescribed equipment is present and functional.

C.7.19.3. Day of Surgery: Greets client, properly identifies client with placement of identification and/or allergy band(s). Orients client to Unit. Verifies post procedure transportation arrangement.

C.7.19.4. Conducts and documents pre-op nursing assessment. Verifies clients compliance with instructions. Prepares client for procedure, may need to obtain additional labs. Arranges transport to OR (if necessary).

C.7.19.5. Monitors patients under local infiltration and block anesthesia.

C.7.19.6. Maintains perioperative nursing record.

C.7.19.7. Performs duties as circulator for surgical procedures, assuming responsibilities for coordinating patient care activities. Assumes responsibilities for aseptic technique maintenance during procedures, accuracy of sponge counts and adequacy of supplies.

C.7.19.8. May perform as a scrub nurse.

C.7.19.9. Post-op: Receives, assesses, monitors and documents findings on client. Provides education. Ambulates. Verifies post-op voiding. Discharges patient after re-enforcement of teaching. Completes nursing care document, reorganizes chart and signs out patient. Makes follow up clinic appointment for patient.

C.7.19.10. Must set up, operate, maintain, and discontinues medical equipment. Administers prescribed medications. Provides emergency medical/surgical treatment. Provides nutrition and nourishment. Assists with transporting patient(s). Maintains nursing record(s) and plans. Provides patient and family teaching. Provides consultative services. Performs QA&I. Provides a safe environment.

C.7.19.11. Telephone follow up assessment of patient and instruction reinforcement.

C.7.19.12. Assumes responsibility when assigned for inservice programs and training activities relative to surgical procedures and maintenance of aseptic technique and basic aseptic principles. Orients and trains new staff members or OR tech/nursing students in scrubbing and circulating duties.

C.7.20. OUTPATIENT RN

C.7.20.1. AMBULATORY CARE RN. Additional duties/responsibilities of all Registered Nurses assigned to the ambulatory care clinics (Also applicable to Registered Nurses working in the following clinics: Orthopedic, Neurology, Urology, Otolaryngology, MRI/Angiography, Dental, Ophthalmology, Medical, Blood Bank, Social Work, and Plastic Surgery Clinics):

C.7.20.1.1. The incumbent is responsible for providing professional nursing care and related nursing services to eligible beneficiaries in an ambulatory care clinic setting.

C.7.20.1.2. Makes independent nursing practice decisions to plan, organize, develop, and implement methods of providing quality nursing care/nursing service in an ambulatory care setting.

C.7.20.1.3. Provides individual, group, and family/significant other counseling and health teaching in relation to the patient's condition and his/her ability for self-care. Provides for accessibility to various literature resources dealing with subjects related to specific patient health problems. Provides physical and psychological support to patients and significant others, explains procedures and treatments, and promotes cooperation among staff, patients, and significant others.

C.7.20.1.4. Maintains liaison with allied health care professionals and community referral services. Coordinates patient health care needs with appropriate referrals as indicated.

C.7.20.1.5. Maintains link with professional organizations and nursing standards relevant to ambulatory care. Implements nursing care in the ambulatory setting using these standards.

C.7.20.1.6. Liaisons with appropriate inpatient units as an advocate for continuity of care planning, follow-up, and outcome measurement.

C.7.20.1.7. Possesses age specific knowledge and competency appropriate to setting population.

C.7.20.1.8. Promotes health maintenance and preventive health initiatives in caring for patients in the ambulatory setting.

C.7.20.1.9. Collaborates in the planning, organizing, and directing of clinical operations to include providing technical supervision to paraprofessional nursing staff. Possesses knowledge of basic management theory as applicable to the ambulatory care setting.

C.7.20.1.10. Collaborates in the review and revision of clinic standing operating procedures.

C.7.20.1.11 Performs phone triage based on accepted protocols and assists as needed in accessing appropriate ambulatory/emergency care for beneficiaries.

C.7.20.2. BLOOD BANK RN. See Ambulatory Care Clinic duties given above.

C.7.20.3. ENDOCRINOLOGY/INFERTILITY RN. Additional duties/responsibilities of Registered Nurses assigned to the Endocrinology/Infertility Clinic:

C.7.20.3.1. Performs: (a) Post-coital Testing; (b) Cervical and Intrauterine Inseminations; (c) Pelvic Ultrasounds; and (d) Prepares semen specimens for inseminations.

C.7.20.3.2. Demonstrates competency in all aspects of infertility care including assisted pregnancies.

C.7.20.3.3. Provides patient teaching and counseling related to infertility.

C.7.20.3.4. Maintains patient records, to include: (a) Normal and abnormal lab; (b) Patient visits; (c) Follow-up care; and (d) Physician orders.

C.7.20.4. FAMILY PRACTICE/PRIMARY CARE RN. See Ambulatory Care Clinic duties given above.

C.7.20.5. FORENSIC RN

C.7.20.5.1. Receive, triage, and respond to telephone inquiries/consultations regarding suspected child maltreatment.

C.7.20.5.2. Receive, prioritize, schedule and accomplish pre-appointment counseling for patient appointments at the AFCCP in coordination with involved family members and family advocacy, child protective services, investigative, and legal professionals.

C.7.20.5.3. Coordinate, schedule and/or provide child abuse teaching.

C.7.20.5.4. Receive, catalog, triage, prioritize, and track progress of cases of suspected child maltreatment sent to AFCCP for medical-legal review, medical evaluation, and/or expert testimony.

C.7.20.5.5. Coordinate appropriate distribution of consultative reports.

C.7.20.5.6. Appropriately maintain photographic/digital records of suspected child maltreatment.

C.7.20.5.7. Perform medical-legal case reviews and/or death reviews regarding suspected child maltreatment under supervision.

C.7.20.5.8. Chaperone, assist, and/or perform (under supervision) forensic interviews and diagnostic colposcopic medical examinations for suspected child sexual abuse.

C.7.20.5.9. Assure accurate collection and handling of laboratory specimens obtained during medical examination for suspected child sexual abuse (including phlebotomy).

C.7.20.5.10. Provide HIV counseling and reporting of communicable diseases when necessary.

C.7.20.5.11. Control access to sensitive and/or classified investigative case materials.

C.7.20.5.12. Research medical literature for specific requested information.

C.7.20.6. GYN-ONCOLOGY RN. Additional duties/responsibilities of Registered Nurses assigned to the GYN-Oncology Clinic:

C.7.20.6.1. Physically able to tolerate the occupational risks of exposure to cytotoxic agents. Those classified as high risk are (a) Nurses trying to conceive; and (b) Nurses who have undergone cancer treatments after surgery.

C.7.20.6.2. Instructs patients of purpose and effects of chemotherapy, effective prevention and management of side effects, and recognition of early signs of complications.

C.7.20.6.3. Demonstrates proficiency in the administration and disposal of chemotherapy.

C.7.20.6.4. Correlates physical assessment and laboratory data with the side effects of the various drugs.

C.7.20.6.5. Provides patient and family instructions on both external and implantable venous access devices, draws specimens and administers fluids and medications through these lines, and serves as a resource for the professional staff.

C.7.20.6.6. Participates in scientific research and experimental therapy as directed by the primary investigator within the clinic and maintains documentation in accordance with local policy.

C.7.20.6.7. Instructs patients on special procedures such bone marrow biopsies and lumbar punctures.

C.7.20.6.8. Conducts nursing rounds on inpatient wards providing assessment, treatment, teaching, counseling, and follow-up for patients with wide variety of hematologic and oncologic conditions; assists with development of nursing care plans and support nursing staff in care of cancer patients.

C.7.20.6.9. Maintains patients' records to include drug calculation, lab results, and patients' visits.

C.7.20.6.10. Participates in weekly inpatient rounds and Clinical Cancer Conference.

C.7.20.6.11. Primary responsibility is to assist with all colposcopies and Loop Electrical Excision Procedures (LEEP).

C.7.20.6.12. Teaches and counsels patients on varying degrees of dysplasia and treatments for same.

C.7.20.6.13. Maintains patient records to include: lab data, procedures completed, response to treatment, patient visits, and follow-up needs.

C.7.20.7. LACTATION CONSULTANT RN. Additional duties/responsibilities of Registered Nurses assigned to the Lactation Consultant Clinic:

C.7.20.7.1. Develop and implement guidelines and standards of care for breast-feeding throughout the hospital, and promotes adherence to the same.

C.7.20.7.2. Discusses the effects of medications, recreational drugs, chemicals, and home remedies on lactation and infant health.

C.7.20.7.3. Develops the necessary understanding of cultural differences in the community as they relate to breast-feeding.

C.7.20.7.4. Uses accepted counseling techniques and communication skills with mothers and support persons.

C.7.20.7.5. Offer regularly scheduled prenatal breast-feeding classes to inform prospective mothers of services available at the hospital and outpatient clinics, and to provide them with sufficient information to make an informed decision about infant feeding.

C.7.20.7.6. Performs daily rounds on all post partum breast-feeding patients with individualized teaching and problem solving as the primary focus; systematically obtains and updates the history of the mother and infant.

C.7.20.7.7. Develops with the mother a comprehensive feeding and care plan based on the history and assessment; provides written instructions to the mother.

C.7.20.7.8. Coordinates care of babies and mothers having serious problems with all members of the health care team (Pediatricians, Obstetricians, Nutritionist, etc. as appropriate). Problems may be physical or emotional.

C.7.20.7.9. Selects and explain assistance techniques based on history and assessment of the situation: increase or decrease infant milk intake; milk supply modification; manual (hand) milk expression; safe and effective collection and storage of breastmilk; alternate massage; maternal diet modification relative to sufficient intake, maternal or infant food intolerance, maternal or infant food allergies and their effect on the infant and lactation; finger-feeding with tubing, syringe, dropper.

C.7.20.7.10. Counsels postnatal patients and performs follow-up phone calls to outpatient clients 2-5 days after discharge, and schedules return visits for those patients who need "hands on" help.

C.7.20.7.11. Maintains accurate records of patient education or direct hands on care, referrals, and follow-up calls.

C.7.20.7.12. Ensures adequate supply of breast-feeding equipment and devices are on hand to meet patient demand and establishes and maintain community contacts for availability of equipment when the mother goes home.

C.7.20.7.13. Evaluates resource materials and maintains resource library of breast-feed materials appropriate for health care providers and mothers.

C.7.20.7.14. Orients and educates staff on postpartum units and on pediatric inpatient and outpatient units in relation to the Breast-feeding program and competency based skills necessary to care for breast-feeding mothers.

C.7.20.7.15. Participates in continuing education through seminars, workshops, conferences, and network with others in the field.

C.7.20.8. MRI/ANGIOGRAPHY RN. See Ambulatory Care Clinic duties given above.

C.7.20.9. NEUROLOGY RN. See Ambulatory Care Clinic duties given above.

C.7.20.10. OB/GYN RN

C.7.20.10.1. Render professional nursing care to obstetrical and gynecology patients within the clinic.

C.7.20.10.2. Performs assessment/data collection in an ongoing and systematic manner, focusing on physiologic, psychologic, and cognitive status.

C.7.20.10.3. Formulate a goal directed plan of care which is prioritized and based on determined nursing diagnosis and patient outcomes.

C.7.20.10.4. Implement care in a knowledgeable, skillful, consistent, and continuous manner.

C.7.20.10.5. Establish priorities of patient care based on essential patient needs and available unit resources including time, personnel, equipment, and supplies.

C.7.20.10.6. Evaluate effectiveness of self, care given by all health team members, and contribution of systems, environment, and instrumentation in progressing patient toward outcomes.

C.7.20.10.7. Demonstrate competency in medication and intravenous (IV) administration to include blood products and Total Parental Nutrition (TPN).

C.7.20.10.8. Identify patient/significant other learning needs and implement appropriate measures to meet identified needs.

C.7.20.10.9. Perform documentation duties on unit and in patient record which are timely, accurate, and concise.

C.7.20.10.10. Demonstrate awareness and sensitivity to patient/significant others' rights, as identified within the institution.

C.7.20.10.11. Function with an awareness and application of safety issues as identified within the institution.

C.7.20.10.12. Perform efficiently in emergency patient situations following established protocols, remaining calm, informing appropriate persons, and documenting events.

C.7.20.10.13. Demonstrate sound knowledge base and actions in the care and decision making for designated patient populations.

C.7.20.10.14. Maintain an awareness of responsibility and accountability for own professional practice.

C.7.20.10.15. Participate actively in staff development for unit and Directorate personnel.

C.7.20.10.16. Demonstrate self-directed learning and participation in continuing education to meet own professional growth.

C.7.20.10.17. Seek validation of knowledge base, skill level, and decision making as necessary and assertively seeks guidance in areas of question.

C.7.20.10.18. Demonstrate awareness of legal issues in all aspects of patient care and unit function and strive to manage situations in a reduced risk manner.

C.7.20.10.19. Formulate and use effective working relationships with all health care team members, patients, and significant others.

C.7.20.10.20. Practice effective problem identification and resolution skills as a method of sound decision making.

C.7.20.10.21. Review and make appropriate notation on the chart of a patient at least once in an 8 hour shift, or per unit specific requirements.

C.7.20.10.22. Perform other duties within the scope of OB/GYN RN practice as requested.

C.7.20.11. OPHTHALMOLOGY RN. See Ambulatory Care Clinic duties given above.

C.7.20.12. ORTHOPEDIC RN. See Ambulatory Care Clinic duties given above.

C.7.20.13. OSTOMY RN. Additional duties/responsibilities of Registered Nurses assigned to the Ostomy clinic:

C.7.20.13.1. Provides preoperative counseling for patients and families.

C.7.20.13.2. Marks location of stoma site if requested by physician.

C.7.20.13.3. Assists nursing staff in developing patient care plans.

C.7.20.13.4. Arranges for local Ostomy association visitor when applicable.

C.7.20.13.5. Provides post operative stomal and adjunct wound care for ostomy patients.

C.7.20.13.6. Initiates proper skin care through the use of skin barriers.

C.7.20.13.7. Performs initial colostomy irrigation and teaching of same on new colostomates when ordered by physician.

C.7.20.13.8. Instructs ostomates and family in self care.

C.7.20.13.9. Counsels ostomates and their families with respect to psychological and emotional adjustments.

C.7.20.13.10. Coordinates the total rehabilitative plan for the ostomate with other disciplines.

C.7.20.13.11. Provides continuity of care for the ostomate on a long-term basis.

C.7.20.13.12. Promotes the competence, performance and understanding of hospital personnel.

C.7.20.14. OTOLARYNGOLOGY RN. See Ambulatory Care Clinic duties given above.

C.7.20.15. PEDIATRIC ONCOLOGY RN. Additional duties/responsibilities of Registered Nurses assigned to the pediatric oncology clinic:

C.7.20.15.1. Physically able to tolerate the occupational risks of exposure to cytotoxic agents. Those classified as high risk are: (1) Nurses trying to conceive; and/or (2) Nurses who have undergone cancer treatments after surgery.

C.7.20.15.2. Instructs patients and/or parents as appropriate of the purpose and effects of chemotherapy, effective prevention and management of side effects, and recognition of early signs of complications.

C.7.20.15.3. Demonstrates proficiency in the administration and disposal of chemotherapy.

C.7.20.15.4. Correlates physical assessment and laboratory data with the side effects of the various drugs.

C.7.20.15.5. Provides patient and/or parents with instructions on both external and implantable venous access devices, draws specimens and administers fluids and medications through these lines, and serves as a resource for the professional staff.

C.7.20.15.6. Participates in scientific research and experimental therapy as directed by the primary investigator within the clinic and maintains documentation in accordance with local policy.

C.7.20.15.7. Instructs patients and/or parents on special procedures such as bone marrow biopsies and lumbar punctures.

C.7.20.16. PEDIATRICS RN. See Ambulatory Care Clinic duties given above.

C.7.20.17. PLASTIC SURGERY RN. See Ambulatory Care Clinic duties given above.

C.7.20.18. PRE-OP ANESTHESIA. Additional duties/responsibilities of Registered Nurses assigned to the pre-op anesthesia clinic:

C.7.20.18.1. Performs the initial preoperative screening, including a review of the patient's medical history and the recording of pertinent vital signs.

C.7.20.18.2. Refers patients of intermediate and greater complexity to the staff anesthesiologist assigned to the Preoperative Assessment Clinic for further assessment.

C.7.20.18.3. Assists with patient and family teaching. Explains required preoperative tests and procedures. For uncomplicated patients, the Preoperative Assessment Nurse will explain the likely anesthetic choices and the anticipated course of events in the perioperative period.

C.7.20.18.4. Performs entry of patient information on the Preoperative Assessment Clinic's patient data base. Generates reports from the data base as required.

C.7.20.18.5. Liaison with the Departments of Radiology, Pathology, Cardiology, and Internal Medicine for collection of essential preoperative clinical information including x-rays, lab tests, ECG's and specialty consultations. Ensures that these results are entered into the Preoperative Assessment Clinic patient data base.

C.7.20.18.6. Coordinates all aspects of preoperative assessment, including the scheduling of patients for evaluation by the Preoperative Assessment Clinic and the scheduling of required lab tests and x-rays.

C.7.20.18.7. Ensures that consultation reports are completed in a timely manner and are distributed to the patients medical record, the surgeon, and the Preoperative Assessment Clinic files.

C.7.20.19. PSYCHIATRIC RN. Additional duties/responsibilities of Registered Nurses assigned to the Ambulatory Psychiatric clinic:

C.7.20.19.1. Uses in-depth knowledge of psychiatric nursing theory and principles relative to the care of patients with complex psychiatric conditions, to include group dynamics, use of psychotropic medications, crisis intervention and individual/family counseling and teaching.

C.7.20.19.2. Follows Command and department specific policies for Seclusion/Restraint, Elopement, and Management of the Assaultive Patient.

C.7.20.19.3. Assesses and intervenes in clinical situations (including suicidal, homicidal, or elopement behavior) that may require physical restraint to maintain safety and security of the clinic environment.

C.7.20.19.4. Performs triage and initial biopsychosocial assessments of patients, including emergency telephone psychiatric triage.

C.7.20.19.5. Collaborates with the multidisciplinary team and monitors patient status through continuum of care (out-patient to in-patient to follow-up aftercare).

C.7.20.19.6. Administers and monitors effectiveness of medications as ordered and within the guidelines of nursing practice.

C.7.20.19.7. Provides case management, discharge planning, and psychosocial rehabilitative services to high risk, problem prone outpatients awaiting Physical Evaluation Boards.

C.7.20.19.8. Liaisons with commands, community resources, and numerous clinical and administrative centers to guide and assist impaired patients who must negotiate complicated administrative systems for care, records, and pay.

C.7.20.19.9. Provides ongoing education, support and rehabilitative opportunities; including social skills training classes, written literature and handouts, symptom and medication management groups, and individual counseling.

C.7.20.19.10. Links patients to federal and community resources and agencies for appropriate aftercare.

C.7.20.19.11. Tracks Physical Evaluation Board processing, living and work site locations for patients in the Continuity of Psychiatric Care Program.

C.7.20.20. RADIATION ONCOLOGY RN. Additional duties/
responsibilities of Registered Nurses assigned to the radiation oncology clinic:

C.7.20.20.1. Instructs patients on the purpose and effects of radiation treatment, effective prevention and management of side effects, and recognition of early signs of complications.

C.7.20.20.2. Assists the radiation oncologist in preparation and evaluation of patient teaching materials.

C.7.20.20.3. Possess ability to concisely and thoroughly teach and provide inservice training for nursing personnel who care for patients receiving radiation therapy and/or implants.

C.7.20.20.4. Meets routinely with other nursing personnel to facilitate the exchange of ideas and create improved understanding and relationship between the Radiation Oncology Division and the patient care areas.

C.7.20.20.5. Correlates physical assessment and laboratory data with the side effects of radiation treatment.

C.7.20.20.6. Identifies any acute local or systemic reactions associated with treatment, and under the radiation oncologist's supervision initiate corrective measure in the event any of these reactions should occur.

C.7.20.20.7. Demonstrates knowledge of the side effects of chemotherapeutic treatment and especially the interaction between chemotherapy and radiation.

C.7.20.21. TRIAGE/EMERGENCY ROOM RN. Additional duties/
responsibilities of emergency department Registered Nurses:

C.7.20.21.1. Appropriately triages patients who present to the Emergency Department.

C.7.20.21.2. Continually assesses patient(s) condition(s) for potential or life threatening crisis. Monitors and documents patient response to treatment in a timely fashion.

C.7.20.21.3. Safely administers prescribed medications to include intravenous drips and intravenous push drugs.

C.7.20.21.4. Operates hemodynamic equipment safely and effectively. Interprets generated data and responds appropriately.

C.7.20.21.5. Supervises and provides care to patients of all ages presenting in the Emergency Department.

C.7.20.21.6. Performs Advanced Life Support (ALS) and Pediatric Advanced Life Supports (PALS) as indicated.

C.7.20.21.7. Assists the physician(s) in the performance of emergency procedures.

C.7.20.22. UROLOGY RN. See Ambulatory Care Clinic duties given above.

C.7.21. CASE MANAGER

C.7.21.1. Participate in scheduled meetings to review and evaluate the care provided to patients, identify opportunities to improve the care delivered, and recommend corrective action when problems exist.

C.7.21.2. Assist in defining patient population requiring professional nursing intervention and the establishment of guidelines to evaluate selected patients.

C.7.21.3. Work directly with selected patients and families to develop a plan of care to meet needs. Collaborate with other health care disciplines to provide total quality patient care.

C.7.21.4. Function as care coordinator to assure all aspects of patient care needs are met, to include assessment, intervention and follow-up.

C.7.21.5. Obtain and document patient and pertinent family history. Orient new patients and their families as required.

C.7.21.6. Receive patient assignments, formulate, document, and implement a nursing care plan for assigned patients and review and update them as required.

C.7.21.7. Check patient identification, physician's orders, and transfer information as applicable. Requisition and arrange for ordered diagnostic and therapeutic services as directed.

C.7.21.8. Render professional nursing care to patients.

C.7.21.9. Administer immunizations, allergy treatments, oral parenteral and IV medications.

C.7.21.10. Direct work of LPNs, medical assistants and Hospital Corps personnel. Coordinate the clinic's operations in the absence of the/a Nurse Manager.

C.7.21.11. Administer specific medications at designated times and in designated manner. Receive, report and count narcotics with nurse going off duty. Maintain controlled drug records.

C.7.21.12. Observe patients and report pertinent data on condition and medication or treatments.

C.7.21.13. Prepare and administer IVs, and monitor their proper function.

C.7.21.14. Demonstrate proficiency according to operating manuals when using patient care electrical equipment.

C.7.21.15. Chart nursing observations and ensure record is complete with all procedures and test results recorded. Maintain required clinic records, patient charts, forms, logs, records, registers, census reports and collect required statistics.

C.7.21.16. Perform nursing techniques for the comfort and well-being of patients.

C.7.21.17. Prepare equipment and assist physicians with treatment procedures.

C.7.21.18. Recognize emergencies and respond with appropriate protocol, e.g. resuscitation, oxygen, emergency drugs, cardiac massage, application of medical equipment and other, as established by the medical staff.

C.7.21.19. Explain procedures and treatments to patients and significant others to allay apprehension and gain cooperation and support.

C.7.22. CHARGE NURSE

C.7.22.1. Provide clinical oversight of the nursing staff within the clinic.

C.7.22.2. Coordinate nursing staff operations with the medical staff.

C.7.22.3. Provide Registered Nurse services.

C.7.23. HEALTH EDUCATOR

C.7.23.1. Review Health Enrollment Assessment Review (HEAR) reports and PCM reports for high risk and frequent users of health care. Contact these patients to schedule education opportunities in a classroom format, in 1 on 1 appointments, or through other appropriate means.

C.7.23.2. Review HEAR Reports and PCM reports for delinquent preventive services, contact the patient, and schedule an appointment for the clinical preventive service. Ensure that all enrollees receive their clinical preventive services at recommended age intervals.

C.7.23.3. Use the HEAR group data to determine the health risk of the population and how to improve the overall health of the enrolled population.

C.7.23.4. Educate the enrolled population about the Healthwise handbook and how to use it for home care.

C.7.23.5. Use the PPIP Flow Sheet DD2766 medical records form for documenting clinical preventive services.

C.7.23.6. Provide health promotion and education opportunities including, but not limited to, tobacco awareness; tobacco cessation classes or appointments consistent with the MTF tobacco cessation program; and nutrition education and weight management.

C.7.24. RADIOLOGY RN

C.7.24.1. The health care worker shall perform a full range of duties within the scope of the statement of work, on site using government furnished facilities, supplies and equipment. The standards of performance for all health care workers shall reflect the degree of care, skill, and learning expected of a reasonably prudent health care worker in the professional category to which he/she belongs.

C.7.24.2. The health care worker shall provide training and/or direction to supporting government employees assigned to them during the performance of clinical procedures. Such direction and interaction shall adhere to government and professional clinical standards and accepted clinical protocol. The health care worker shall participate in clinical staff performance improvement functions at the prerogative of the Commander.

C.7.24.3. Actual health care worker clinical activity will be a function of the Commander's credentialing process and the overall demand for services. Health care worker productivity is expected to be comparable with that of RNs authorized the same scope of services.

C.7.24.4. The health care workers providing services under this contract shall be rendering personal services and are subject to supervision by MTF personnel. First line supervision is by the Director of Ancillary Services, or his/her designated representative.

C.7.24.5. The health care worker shall complete MTF medication administration test, and successfully complete the MTF Medication PSI (Personal Study Instruction). The Medical Administration test may be waived if the government deems the health care worker can evidence successful completion of a similar and comparable pharmacology test.

C.7.24.6. The health care worker shall complete MTF provided inservices in IV placement, and blood and blood administration prior to assignment to these tasks.

C.7.25. LICENSED PRACTICAL NURSE

C.7.25.1. Ensure patient care is carried out in accordance with the Standards of Nursing Care and the policies and procedures of the clinic.

C.7.25.2. Check patients into the clinic and triage using clinic guidelines. Inform the nurse, physician extender or physician of the patient's condition and potential problems.

C.7.25.3. Obtain and document patient and pertinent family history.

C.7.25.4. Perform a full range of diagnostic support duties which include taking vital signs, collecting specimens, obtaining, recording and tracking results of diagnostic tools.

C.7.25.5. Assist the physician in a variety of diagnostic examinations such as lumbar punctures, colposcopies and sigmoidoscopies, by preparing, positioning and monitoring patients, and setting out and handling instruments and equipment.

C.7.25.6. Perform laboratory tests such as checking urine for sugar and stool for blood. Record and report results.

C.7.25.7. Perform a range of treatment procedures that include sterile dressing changes, applying compresses, monitoring IV fluids, inserting catheters and suctions, inserting nasogastric tubes, administering medications, giving enemas, setting up and giving treatment that requires auxiliary equipment such as oxygen and suction. Ambulate patients to other areas to include Radiology, various clinics, and physical therapy.

C.7.25.8. Prepare patients for tests, examinations, treatments, and/or surgery. Collect specimens such as urine, sputum and stool. Label specimens for laboratory examinations and follow up by using CHCS or calling the laboratory for reports. Alert provider to conditions which deviate from expected findings.

C.7.25.9. Prepare, start, monitor and discontinue intravenous fluids with accuracy and in accordance with established procedures.

C.7.25.10. Observe, report and document all observed symptoms, reactions, treatments and changes in the patient condition to the Registered Nurse, physician extender or physician. Make careful observations to assess that nursing procedures and treatment do not cause additional distress.

C.7.25.11. Perform routine nursing care activities such as taking blood pressures, temperatures, baths and hygiene care, passing and removal of trays, changing of linen, and otherwise assist in the care of the physical needs of the patient.

C.7.25.12. Operate basic equipment required in delivery of patient care such as pumps, IV pumps, oxygen administration apparatus and incentive spirometers.

C.7.25.13. Execute physician's orders within the guidelines of standard nursing practice. Ensure accurate medication is administered in correct form and dosage to the proper patient as directed by the physician.

C.7.25.14. Maintain records of nursing care, dose and time of medication administered, and indicate if the medication was not administered and the reason.

C.7.25.15. Administer immunizations in a safe and accurate manner with strict adherence to all NAVHOSP, NAVMED and CDC Immunization policies.

C.7.25.16. Recognize conditions which require isolation. Ensure universal precautions are used in all patient encounters.

C.7.25.17. Recognize emergency situations and assist with, or institute emergency measures for sudden adverse developments in patients such as cardiac arrests.

C.7.25.18. Perform preoperative procedures for minor surgery, and fill out pre-op checklist.

C.7.25.19. Assist patients in admission, transfer, and perform discharge planning follow-up and documentation.

C.7.25.20. Support the patient and/or family members toward the achievement of treatment plan goals. Provide instructions to the patient on invasive procedures, surgical procedures and post surgical conditions which were previously provided to the patient by a nurse, physician extender or physician.

C.7.25.21. Instruct patients on how equipment is used such as oxygen, suction, cardiac monitor and pulse oximeter. Instruct patients and family on use of prescribed medications, contraindications of medications, and the necessity of proper follow-up care.

C.7.25.22. Provide emotional support to patients and families.

C.7.25.23. Ensure necessary supplies are available and equipment is in functioning order.

C.7.25.24. Provide an orderly, clean and safe environment for patients and staff.

C.7.25.25. Handle telephone information requests with courtesy, accuracy and respect for patient confidentiality. Receive information and distribute messages as necessary.

C.7.25.26. Ensure maintenance and adequate supply of pharmaceuticals in the clinic.

C.7.25.27. Ensure upkeep and perform checks of emergency equipment i.e., oxygen, emergency cart, suction apparatus, etc. and maintain appropriate logs. Inform the Charge Nurse of and discrepancy on daily checks.

C.7.26. CERTIFIED NURSING ASSISTANT

C.7.26.1. Prepare exam rooms prior to patient's arrival.

C.7.26.2. Obtain patient's medical record following appropriate procedures.

C.7.26.3. Check patient's vital signs, to include temperature, respiration, pulse, weight and blood pressure.

C.7.26.4. Obtain and document patient's current medical history, drug history, chief complaints, allergies and vital signs on the correct Standard Form before patient is in the exam room.

C.7.26.5. Assist the provider as needed during exams.

C.7.26.6. Perform diagnostic procedures when ordered, to include EKG's, urine dip sticks, phlebotomy, etc.

C.7.26.7. Transport patients to other clinical areas as needed.

C.7.26.8. Check each chart for the provider's signature, stamp, and each patient's diagnosis prior to returning the chart to Health Records.

C.7.26.9. Administer medication to patients as directed.

C.7.26.10. Obtain lab and x-ray results.

C.7.26.11. Maintain exam room stock levels and perform routine maintenance of exam rooms, to include dusting, cleaning wash basins, etc.

C.7.26.12. Participate in inventory procedures as directed.

C.7.26.13. Complete lab and x-ray requisitions in accordance with clinic policies.

C.7.26.14. Enter demographic data into the computer upon patient check-in; enter diagnosis and departing time when patient is released.

C.7.26.15. Answer telephone and transcribe accurate messages.

C.7.26.16. Ensure that any broken or unsafe equipment is removed from the clinic in a timely manner and notify appropriate personnel.

C.7.26.17. Assist with patient flow and give direct patient care as directed.

C.7.26.18. Operate the following medical equipment, as directed, such as Automatic Blood Pressure Monitor, Hand Held Nebulizer, EKG Machine (12 lead), Electronic Thermometer, IV infusion pump (Set-up only), Typanometer.

C.7.27. CARDIAC TECHNOLOGIST

C.7.27.1. Cardiac technologists operate technical equipment to monitor, record and measure the way patients' hearts are working in order to help doctors diagnose and treat patients with heart disease.

C.7.27.2. Operate computerized equipment to monitor and record the electrical activity and pressures generated by the heart.

C.7.27.3. Decide on patient treatment by analyzing heart function and blood flow data measured through catheters (thin tubes) placed within the heart.

C.7.27.4. Measure patients' blood flow by analyzing their bodies' use of oxygen, or by analyzing the change in temperature of blood when ice-cold fluid is put in the heart.

C.7.27.5. Analyze the amount of oxygen in blood samples taken from the heart chambers to check for holes in the heart.

C.7.27.6. Operate equipment and monitor patients' status during exercise testing for heart disease.

C.7.27.7. Take pictures of patients' hearts with ultrasound (echocardiography) to check heart function and identify abnormalities.

C.7.27.8. Analyze 24-hour tape recordings of patients' heart rhythms.

C.7.27.9. Test pacemakers and defibrillators while they are being put into patients' hearts, and then program them to allow patients to lead a normal life.

C.7.27.10. Help doctors burn out electrical short circuits in patients' hearts (radio-frequency ablation).

C.7.28. CARDIOVASCULAR TECHNOLOGIST

C.7.28.1. Receive patients and explain procedures, providing humane and appropriate care and communication to alleviate fear of examination. Correctly position the patient for the examination and make adjustments necessary for the required examination. Determine if any special patient preparation is required.

C.7.28.2. Be familiar with and be able to use the linear, sector, and endovaginal probes as well as pulse and color Doppler capabilities of all of the scanners.

C.7.28.3. Receive and interpret requests or instructions for diagnostic ultrasound scans; perform daily warm up and assigned quality control checks of the ultrasound scanners.

C.7.28.4. Explain process to patients, and instruct and assist patient in assuming physical position for examination.

C.7.28.5. Key test data and patient information into computer of ultrasound equipment to maintain record of test results.

C.7.28.6. Perform a full range of diagnostic ultrasonic examinations.

C.7.28.7. Identify abnormalities during testing and determine need for additional scans of affected area.

C.7.28.8. Recognize anatomic variants and determine which other area(s) of the body should be scanned. Use a detailed understanding of diseases of anatomy to accomplish effective ultrasound scanning.

C.7.28.9. Advise the radiologist of results of the examination and provide them with a preliminary diagnosis. Notify physician of significant scans requiring immediate attention.

C.7.28.10. Maintain and clean ultrasound equipment on a regular basis in accordance with Radiology Department standards. Stock and maintain an adequate level of supplies required to ultrasound examinations. Recommend necessary monthly repairs when diagnostic quality is degraded.

C.7.28.11. Make minor adjustments on equipment. Differentiate artifacts from normal or pathological processes and recognize electronic equipment limitations. Program the examination equipment, set up the machine and scanning techniques to be employed.

C.7.28.12. Review new developments in the field by reading journals and attending meetings when possible and recommend to supervisor those changes which would improve the operation of the ultrasound section. Perform other related duties as assigned.

C.7.28.13. Recognize the need for and institute the necessary emergency measures for situations where a person requires resuscitation procedures due to cardiac or respiratory arrest.

C.7.29. DIETETIC TECHNICIAN

C.7.29.1. Calculate nutrient and energy intake values and assist in evaluating data from patient's dietary history.

C.7.29.2. Develop and revise nutritional care plan for patients not at nutritional risk, specifying diet, counseling, etc., and document in the medical record.

C.7.29.3. Monitor, evaluate and document patient's adherence/acceptance/tolerance of nutritional care/food intake and make appropriate recommendations.

C.7.29.4. Counsel patients not at nutritional risk concerning nutrition concepts and desired change in eating habits. Under direction of the dietitian, instruct patients and their families on prescribed diets including low sodium, weight reduction, prenatal, dental liquid, low fat, low residue, low fiber, high fiber, cardiac, and fat controlled, and document in the medical record.

C.7.29.5. Provide group classes in basic nutrition and routine modified diets to patients and/or employees. Provide inservice training and orientation for staff employees.

C.7.29.6. Gather data according to prescribed methods for use in evaluating patient food service. Evaluate patient meal test trays for accuracy in accepted standard levels and give recommendations as necessary. Participate and conduct meal rounds, trayline observation and patient opinion surveys.

C.7.29.7. Consult the appropriate dietitian concerning unusual nutritional problems of patients and take appropriate action if necessary.

C.7.29.8. Complete nutrition analysis of menus, recipes, diets, and calorie counts, using the available computer software.

C.7.30. ECHOCARDIOGRAPHIC TECHNICIAN

C.7.30.1. Take and process echocardiograms and echo-phonocardiograms.

C.7.30.2. Responsible for making electronic manipulations and assisting physicians in the interpretation of ultrasound patterns utilizing a variety of skills.

C.7.30.3. Order supplies and evaluate new products and equipment for possible future use.

C.7.30.4. Responsible for the maintenance and operation of equipment.

C.7.30.5. Perform diagnostic echocardiographic procedures and related duties as directed.

C.7.31. ELECTROCARDIOGRAPH TECHNICIAN (EKG)

C.7.31.1. Operate EKG machine to produce tracings of the heart's electrical activity for review by a physician.

C.7.31.2. Prepare the patient, perform the EKG, identify and report unusual tracings or technical errors, and edit and mount the tracings.

C.7.31.3. Perform more complex cardiac testing such as ambulatory EKG monitoring and exercise stress testing.

C.7.31.4. Operate equipment which measures and records heart action by monitoring and graphically tracing electrical activity occurring during the heart beat.

C.7.31.5. Obtain information for EKG records, including patient identification, history, and medication use.

C.7.31.6. Escort patients to the treatment room or wheel equipment to the patient's bedside.

C.7.31.7. Explain test procedures and give instructions to patients.

C.7.31.8. Attach/connect/operate electrodes from specified body areas to leads from electrocardiograph machine.

C.7.31.9. Direct patients to perform physical exercise as specified by physicians.

C.7.31.10. Recognize emergencies and assist physicians.

C.7.31.11. Identify abnormal heart rhythms.

C.7.31.12. Mark tracing paper to indicate electrode positions, paste/label tracings on mountings for physician's interpretation.

C.7.31.13. Clean and maintain equipment, supply stocks, replace defective stylus (tracing tools).

C.7.32. ELECTROENCEPHALOGRAPHIC TECHNICIAN (EEG)

C.7.32.1. Conduct electroencephalograms on patients in the EEG laboratory or on the wards, to include the ICU and Neonatal Nursery.

C.7.32.2. Review patient records for contributing, complicating or other medical conditions pertinent to the performance of EEG procedures.

C.7.32.3. Explain procedures and position the patient as to insure patient comfort for optimal recording of EEGs.

C.7.32.4. Anticipate and correct factors related to patient discomfort, mechanical and electrical interference (Artifacts).

C.7.32.5. Scan and examine the recording environment to detect and eliminate possible sources of artifacts, and recognize artifacts as they occur in the EEG in real time; work rapidly to diagnose and eliminate artifacts in order to preserve the integrity of the recording.

C.7.32.6. Employ sterile techniques when conducting EEG procedures in the neonatal nursery, ICU or operating room.

C.7.32.7. Select from a wide variety of electrodes and determine the best suited for each individual case situation.

C.7.32.8. Recognize artifacts, patient movements and electroencephalographic findings and make changes in recording techniques and parameters to optimize display of the phenomenon in question. Distinguish artifactual and cerebral sources of electrographic findings. Annotate any changes in recording parameters as they occur.

C.7.32.9. Conduct activation procedures including hyperventilation, photic stimulation used in the assessment of cerebral reactivity and sleep. Recognize clinical manifestations of different types of seizures as they occur and perform behavior testing to assess the degree of responsiveness during the recording. Annotate seizures on testing and the electroencephalographic record, along with responses to testing in real time.

C.7.32.10. Perform multiple sleep latency tests and polygraphic overnight polysomnography, (i.e., simultaneously monitoring 2 patients for polygraphic polysomnography or 1 patient on video EEG seizure monitoring and 1 undergoing polygraphic polysomnography). Recognize sleep apnea, sleep movements, nocturnal seizures, and parasomnias such as asnocturnal myoclonus and REM behavior disorder; make adjustments in recording parameters to optimize performance of sleep studies.

C.7.32.11. Perform brain death EEGs in accordance with American EEG Society Standards. Instruct students and other technicians in EEG techniques.

C.7.32.12. Perform operator maintenance of EEG equipment, e.g., disassemble machine, clean and oil parts and make repairs or replace parts as required. Sharpen, clean and sterilize electrodes.

C.7.32.13. Independently perform Cortical Evoked Potential studies including visual, brainstem and somatosensory evoked potentials.

C.7.32.14. Perform advanced evoked potential studies involving topographic display of fields of evoked potentials; and nonstandard evoked potential evaluations in conjunction with experimental protocols.

C.7.32.15. Troubleshoot during the performance of evoked potential tests to detect artifacts or other technical problems relating to recording of cortical wave forms; when wave forms are not present.

C.7.32.16. Provide basic education concerning the nature of the procedure in order to establish a rapport with the patient and allay fears or any misconceptions about the procedure.

C.7.32.17. Make precise on-line adjustments to optimally display amplitude, duration and other parameters related to the display and printout of wave forms.

C.7.32.18. Provide completed studies to the physician and completes necessary patient documentation in accordance with standard MTF protocols.

C.7.33. EMERGENCY MEDICAL TECHNICIAN

C.7.33.1. Provide a full range of EMT-A services within the MTF emergency department.

C.7.33.2. Upon receipt of an emergency request for an ambulance, accompany the emergency department ambulance.

C.7.34. HEMODIALYSIS TECHNICIAN

C.7.34.1. Set up and operate Hemodialysis machine to provide dialysis treatment for patients with kidney failure. Attach dialyzer and tubing to machine to assemble for use. Mix dialysate, according to formula. Prime dialyzer with saline or heparinized solution to prepare machine for use.

C.7.34.2. Transport patient to dialysis room and position patient for hemodialysis procedures.

C.7.34.3. Measure and record patient's predialysis weight, temperature, blood pressure, pulse and respiration rate. Explain dialysis procedure and operation of hemodialysis machine to patient before treatment to allay anxieties.

C.7.34.4. Clean area of access (fistula, graft, or catheter), using antiseptic solution.

C.7.34.5. Connect hemodialysis machine to patient and perform dialysis procedures.

C.7.34.6. Inspect equipment settings, including pressures, conductivity (proportion of chemicals to water), and temperature to ensure conformance to safety standards.

C.7.34.7. Start blood flow pump at prescribed rate.

C.7.34.8. Inspect venous and arterial pressures as registered on equipment to ensure pressures are within established limits.

C.7.34.9. Calculate fluid removal or replacement to be achieved during dialysis procedure.

C.7.34.10. Monitor patient for adverse reaction and hemodialysis machine for malfunction.

C.7.34.11. Measure and record patient's postdialysis weight, temperature, blood pressure, pulse and respiration rate.

C.7.34.12. Fabricate parts, such as cannulas, tubing, catheters, connectors, and fittings, using hand tools as directed.

C.7.35. MEDICAL ASSISTANT

C.7.35.1. Prepare exam rooms prior to patient's arrival.

C.7.35.2. Obtain patient's medical record following appropriate procedures.

C.7.35.3. Check patient's vital signs, to include temperature, respiration, pulse, weight and blood pressure.

C.7.35.4. Obtain and document patient's current medical history, drug history, chief complaints, allergies and vital signs on the correct Standard Form before patient is in the exam room.

C.7.35.5. Assist the provider as needed during exams.

C.7.35.6. Perform diagnostic procedures when ordered, to include EKG's, urine dip sticks, phlebotomy, etc.

C.7.35.7. Transport patients to other clinical areas as needed.

C.7.35.8. Check each chart for the provider's signature, stamp, and each patient's diagnosis prior to returning the chart to Health Records.

C.7.35.9. Administer medication to patients as directed.

C.7.35.10. Obtain lab and x-ray results.

C.7.35.11. Maintain exam room stock levels and perform routine maintenance of exam rooms, to include dusting, cleaning wash basins, etc.

C.7.35.12. Participate in inventory procedures as directed.

C.7.35.13. Complete lab and x-ray requisitions in accordance with clinic policies.

C.7.35.14. Enter demographic data into the computer upon patient check-in; enter diagnosis and departing time when patient is released.

C.7.35.15. Answer telephone and transcribe accurate messages.

C.7.35.16. Ensure that any broken or unsafe equipment is removed from the clinic in a timely manner and notify appropriate personnel.

C.7.35.17. Assist with patient flow and give direct patient care as directed.

C.7.35.18. Operate the following medical equipment, as directed, such as Automatic Blood Pressure Monitor, Hand Held Nebulizer, EKG Machine (12 lead), Electronic Thermometer, IV infusion pump (Set-up only), Typanometer.

C.7.36. OCCUPATIONAL THERAPY AIDE

C.7.36.1. Design and fabricate specialized adaptive equipment and positioning devices including splint components, wheelchair inserts and self-care equipment.

C.7.36.2. Adapt loaner wheelchairs to appropriate configuration at therapist request.

C.7.36.3. Assist therapist in providing therapy treatments to patients to include self-help, manual, creative, recreational, educational, prevocational and industrial activities in accordance with physician's instructions.

C.7.36.4. Perform routine maintenance on equipment and room facilities used in therapy.

C.7.36.5. Train patients in wheelchair maintenance and utilization of related tools.

C.7.36.6. Implement inventory control duties on all loaner equipment and resale items, including check out and return procedures.

C.7.36.7. Order supplies and maintain stock of resale items and materials in the department.

C.7.36.8. Conducts group and individual classes.

C.7.36.9. Observes and records patient reactions and progress; may assist in developing patient treatment plans.

C.7.36.10. Maintains occupational therapy equipment.

C.7.37. OPHTHALMIC TECHNICIAN

C.7.37.1. Assist in the management of surgery.

C.7.37.2. Perform all necessary tests and patient work-up in order for physicians to adequately diagnose patients. These shall include:

C.7.37.2.1. Performing basic visual acuity tests.

C.7.37.2.2. Measuring and recording distance and near vision, color testing and pinhole vision.

C.7.37.2.3. Lensometry

C.7.37.2.4. Applanation tonometry

C.7.37.2.5. Refractometry

C.7.37.2.6. Kerotometry

C.7.37.2.7. Slit lamp examination and photography

C.7.37.2.8. Ocular motility tests

C.7.37.2.9. Visual field testing - automated and manual

C.7.37.2.10. Corneal topography

C.7.37.3. Accurately transcribe into the patient medical record, past ocular history, adverse drug reactions, allergies, etc., according to established techniques and procedures. Identifies patient's chief complaint.

C.7.37.4. Perform inspection and preparation of instruments, materials, and equipment to insure that they are clean and in proper working condition.

C.7.37.5. Perform inventory of assigned examining rooms to insure adequate supplies are in stock. This shall be coordinated with the supply petty officer of the Ophthalmology Department to ensure all supply requests are met.

C.7.38. OPTICAL TECHNICIAN

C.7.38.1. Maintain, troubleshoot, repair and test optical equipment such as microscopes, refractometers, eye function test equipment, ophthalmoscopes/otoscopes used in patient diagnosis and research.

C.7.38.2. Maintain, troubleshoot, repair and test basic photographic and/or audio-visual equipment.

C.7.38.3. Perform preventive maintenance and electrical safety inspections on microscopes, test, adjust and align.

C.7.38.4. Document maintenance according to regulatory guidelines.

C.7.38.5. Troubleshoot and repair basic electronic circuits within optical devices.

C.7.38.6. Assist senior-level technicians in the repair of optical systems.

C.7.38.7. Use proper biohazard (e.g. bloodborne pathogen) and radiation (e.g. x-ray and isotope) practices while performing duties in areas where contaminants may be present.

C.7.38.8. Confer with faculty, staff, vendors, and/or supervisors in determining equipment problems or fulfilling service requests.

C.7.38.9. Order, stock, and track optical replacement parts.

C.7.39. OPTICIAN

C.7.39.1. Receive patients after examinations by optometrists or ophthalmologists and take necessary facial measurements to complete the proper fitting of eyewear. This shall include the accurate measurement of the patient's pupillary distance and temple length and recording all information on the appropriate patient's health record. For multifocal prescriptions, you shall correctly calculate and measure the height of the segment in accordance with the visual requirements of the patient to obtain maximum visual efficiency. For high dioptric powered prescriptions, you shall make note of special requirements, such as base curve, cylinder component, vertex distance decentration for special effect, etc. You shall also be responsible for placement and repair of Fresnel lenses (press on prisms).

C.7.39.2. Assure that all orders for spectacles are correctly written, entered into the computer and justified in accordance with current instructions.

C.7.39.3. Participate in eye care research projects, statistical studies and equipment evaluation, etc. as directed.

C.7.39.4. Receive incoming eyewear, verify the prescription, notify the patient and dispense the spectacle to the patient. If patients are unable to pick up their eyewear, the eyewear shall be prepared for mailing and mailed to the patient.

C.7.39.5. Order, track and distribute spectacle prescriptions using the SRTS computer program.

C.7.39.6. Responsible for contact lens verification, handling, control, cleaning/disinfecting, maintaining and tracking stock inventory. Assist in training patients with contact lenses on their insertion and removal and proper of their contact lenses.

C.7.40. ORTHOPEDIC TECHNOLOGIST

C.7.40.1. Assist orthopedic surgeons with preventing or correcting disorders of the locomotor structures of the body, including the skeleton, muscles, joints, ligaments, and cartilage. Ensure that patients receive comfortable and successful treatment of orthopedic injuries.

C.7.40.2. Interview patients to obtain a complete history of their injuries and abnormalities and conduct orthopedic assessments of patients and relay information gathered to the attending surgeon.

C.7.40.3. Apply cast, splints, and other orthopedic appliances to patients.

C.7.40.4. Utilize knowledge of the various kinds of casts and splints and the proper procedures for applying and removing them.

C.7.40.5. Utilize knowledge of the numerous types of casting materials and when to use each 1. Ensure appropriate padding, wrapping, and molding techniques to ensure proper fit and placement of all orthopedic devices.

C.7.40.6. Maintain traction configurations for injured patients. This process shall include obtaining the proper traction apparatuses and applying them to patient beds and patient injuries, in compliance with physicians' orders.

C.7.40.7. Position, prepare, and drape patients for surgery and assist the surgeon during the surgical procedure.

C.7.40.8. Attend all annual retraining classes required by this command, to include Basic Life Support Level C (BLS-C) Certification.

C.7.41. PERFUSIONIST

C.7.41.1. Responsible for the selection, setup, and operation of a mechanical device commonly referred to as the heart-lung machine

C.7.41.2. Responsible for operating the heart-lung machine during surgery, monitoring the altered circulatory process closely, taking appropriate corrective action when abnormal situations arise and keeping both the surgeon and the anesthesiologist fully informed.

C.7.41.3. Function in supportive roles for other medical specialties in operating mechanical devices to assist in the conservation of blood and blood products during surgery, and provide extended, long-term support of patients circulation outside of the operating room environment.

C.7.42. PHLEBOTOMIST

C.7.42.1. Conduct patient in-processing prior to specimen collection, including review of paperwork accompanying patients and cordial guidance and assistance.

C.7.42.2. Assemble equipment, such as tourniquet, needles, disposable containers for needles, blood collection devices, gauze, cotton, and alcohol on work tray, according to requirements for specified tests or procedures.

C.7.42.3. Verify or record identity of patient or donor and converses with patient or donor to allay fear of procedure.

C.7.42.4. Perform proper venipuncture, finger-stick and heel-stick procedures appropriate using techniques.

C.7.42.5. Perform set-up and completion of special test-related phlebotomy procedures utilizing appropriate techniques.

C.7.42.6. Fully document all samples obtained per the laboratory's standard operating procedures.

C.7.43. PHYSICAL THERAPY ASSISTANT

C.7.43.1. Administers physical therapy treatments to patients, working under direction of and as assistant to Physical Therapist. Administers active and passive manual therapeutic exercises, therapeutic massage, and heat, light, sound, water, and electrical modality treatments, such as ultrasound, electrical stimulation, ultraviolet, infrared, and hot and cold packs.

C.7.43.2. Administers traction to relieve neck and back pain, using intermittent and static traction equipment.

C.7.43.3. Instructs, motivates, and assists patients to learn and improve functional activities, such as perambulation, transfer, ambulation, and daily-living activities.

C.7.43.4. Observes patients during treatments and compiles and evaluates data on patients' responses to treatments and progress and reports orally or in writing to Physical Therapist.

C.7.43.5. Fits patients for, adjusts, and trains patients in use and care of orthopedic braces, prostheses, and support devices, such as crutches, canes, walkers, and wheelchairs.

C.7.43.6. Confers with members of physical therapy staff and other health team members, individually and in conference, to exchange, discuss, and evaluate patient information for planning, modifying, and coordinating treatment programs.

C.7.43.7. Gives orientation to new Physical Therapy Assistants and directs and gives instructions to Physical Therapy Aids.

C.7.43.8. Performs clerical duties, such as taking inventory, ordering supplies, answering telephone, taking messages, and filling out forms.

C.7.44. PSYCHIATRIC TECHNICIAN

C.7.44.1. Performs assigned patient care procedures under the direct supervision of a professional nurse.

C.7.44.2. Demonstrates sound psychiatric nursing theoretical and practical approaches in providing patient care.

C.7.44.3. Demonstrates a sound understanding and assists in the management of a therapeutic milieu; providing structure, social support, patient education, safety, and social skills training.

C.7.44.4. Supervises, escorts, and/or acts as a therapeutic participant in patient activities both on and off the unit.

C.7.44.5. Provides care for patients utilizing proper infection control and safety techniques as planned and/or ordered. Documents per unit policy and notifies the nurse in charge of any abnormal or unusual findings in a timely manner.

C.7.44.6. Utilizes therapeutic assessment and interview skills to illicit accurate and concise accounts of the patient's condition. Documents patient care using proper terminology and in accordance with unit policy.

C.7.44.7. Utilizes sound judgment and crisis intervention skills, including physical restraint, to prevent or reverse situations which may be potentially harmful. Follows command and unit specific policies for Seclusion/Restraint, Elopement and Management of the Assaultive patient.

C.7.44.8. Exhibits a basic knowledge of psychotropic medications including actions, side effects and common dosages. Follows command policies and procedures for the administration and documentation of scheduled and PRN medications. Informs the nurse in charge of any errors, discrepancies, or adverse patient actions.

C.7.44.9. Performs unit administrative activities as directed.

C.7.44.10. Uses appropriate infection control and safety techniques as required including, but not limited to, good hand washing, wearing of protective gear, and good body mechanics.

C.7.44.11. Screens patients to determine presenting problems and priority of appointment. This may entail telephone triage or in-person evaluation. Performs basic assessment procedures, including initial screening evaluation and standardized psychological testing. Assists credentialed providers with identifying mental health diagnosis and treatment strategies, as well as providing patient education.

C.7.44.12. Assists in providing specialized treatment and rehabilitation of mental health patients. Assists in conducting individual and group therapy sessions. Observes, monitors, reports, and records patient interaction and progress. Institutes precautionary measures to prevent patient injuries due to suicide, homicide, or elopement. Performs verbal and manual restraint and applies mechanical restraints as needed.

C.7.44.13. Presents or facilitates a variety of health and wellness programs, including stress management, suicide intervention, and smoking cessation. Conducts various programs in support of MTF clinics.

C.7.44.14. Coordinates with other base agencies and Military Treatment Facilities (MTFs) regarding specialized care, treatment, and administrative functions. Contacts military or community agencies to obtain collateral information. Explains and interprets mental health services and procedures to access care to patients and commands. Assists in or arranges for patient referral to other facilities for alternate level of care.

C.7.45. SURGICAL/OPERATING ROOM TECHNICIAN. Applicable to personnel working in the Main Operating Room and Outpatient Surgery clinic.

C.7.45.1. Functions as a scrub technician:

C.7.45.1.1. Scrubs hands and arms and puts on sterile operative clothing.

C.7.45.1.2. Arranges sterile setup for operation.

C.7.45.1.3. Passes instruments, sponges, sutures, etc. to surgeon or surgical assistants. Works with surgical instrumentation by name.

C.7.45.1.4. Assists circulating nurse to prepare patients for surgery.

C.7.45.1.5. Assists in preparation of patient's operative site as directed.

C.7.45.1.6. Assists the anesthesiologist as directed.

C.7.45.1.7. Assists in positioning patient in prescribed position for surgery as directed.

C.7.45.1.8. Assists as directed in moving patient to and from the OR suite.

C.7.45.1.9. Counts (with the circulating nurse) sponges, needles and instruments used during surgery.

C.7.45.1.10. Assists in clean up of operating room using standard MTF policies.

C.7.45.1.11. Prepares operative specimens as directed, labels and delivers them to the laboratory.

C.7.45.1.12. Records data on the patient record.

C.7.45.1.13. Moves equipment to and from operating rooms as necessary for scheduled procedures.

C.7.45.1.14. Performs other duties within scope of practice as requested.

C.7.45.1.15. Distributes daily surgery schedules.

C.7.45.1.16. Verifies proper identification of patient and scheduled surgical procedure; reviews record to ensure appropriate consent forms are complete.

C.7.45.1.17. Places proper furnishings, equipment, sterile and nonsterile supplies, and instruments in Operating Room; checks equipment for proper functioning; manages case cart system.

C.7.45.1.18. Arranges ancillary support (other than work center personnel) as required (i.e., x-ray, pathology, medical photo, cast technician).

C.7.45.1.19. Completes travel as required to respond to emergency surgeries that must be completed before the next duty day.

C.7.45.1.20. Provides and places appropriate sterile drapes for surgical procedure.

C.7.45.1.21. Monitors surgical environment and aseptic technique.

C.7.45.1.22. Provides pick-up and delivery service for such items as blood gasses, supplies, specimens, and materials to support Operating Room needs.

C.7.45.1.23. Performs equipment and instrument sanitation; disassembles and sorts instruments and transfers to cleaning area.

C.7.45.1.24. Provides sterile supply service: cleans, washes, decontaminates, and prepares instruments and equipment for sterilization; conducts sterilization by appropriate method; monitors and documents sterilizer function; provides pick-up and delivery services for Central Sterile Supply (CSS) to activities within the medical facility.

C.7.45.1.25. Conducts inventory; determines need; orders, obtains, receives, and stores surgical supplies.

C.7.45.1.26. Performs logistical functions required to maintain equipment account; coordinates between vendors, physicians, nurses, and logistics personnel.

C.7.45.1.27. Inspects and monitors stocking of Cardiopulmonary Resuscitation (PR) crash cart as directed.

C.7.45.1.28. Responds to CPR situations, acute respiratory problems and other emergencies as needed.

(END OF SECTION C)

SECTION D – PACKAGING AND MARKING
[FOR THIS CONTRACT, THERE ARE NO CLAUSES IN SECTION D]

SECTION E - INSPECTION AND ACCEPTANCE

E.1 CLAUSES INCORPORATED BY REFERENCE (FEB 1998) FAR 52.252-2

This contract incorporates one or more clauses by reference, with the same force and effect as if they were given in full text. Upon request, the Contracting Officer will make their full text available. Also, the full text of a clause may be accessed electronically at this address: <http://www.arnet.gov/far>.

<u>FAR CLAUSE</u>	<u>TITLE</u>	<u>DATE</u>
52.246-4	INSPECTION OF SERVICES - FIXED-PRICE	AUG 1996

E.2 INSPECTION AND ACCEPTANCE

- (a) The Contracting Officer's duly authorized representative, the Contracting Officer's Representative(s), will perform inspection and acceptance of services to be provided.
- (b) For the purposes of this clause, the names of the Contracting Officer's representative(s) will be assigned in each individual Task Order issued.
- (c) Inspection and acceptance will be performed at the locations listed in the position specific Statements of Work provided as attachments to this solicitation, or in subsequent task orders.

(END OF SECTION E)

SECTION F - DELIVERIES OR PERFORMANCE

F.1 CLAUSES INCORPORATED BY REFERENCE (FEB 1998) FAR 52.252-2

This contract incorporates one or more clauses by reference, with the same force and effect as if they were given in full text. Upon request, the Contracting Officer will make their full text available. Also, the full text of a clause may be accessed electronically at this address: <http://www.arnet.gov/far>.

<u>FAR CLAUSE</u>	<u>TITLE</u>	<u>DATE</u>
52.242-15	STOP-WORK ORDER	AUG 1989
52.242-17	GOVERNMENT DELAY OF WORK	APR 1984

F.2 MATERIAL INSPECTION AND RECEIVING REPORT (DEC 1991) DFARS 252.246-7000

At the time of each delivery of supplies or services under this contract, the Contractor shall prepare and furnish to the Government a material inspection and receiving report in the manner and to the extent required by Appendix F, Material Inspection and Receiving Report, of the Defense FAR Supplement.

D I S T R I B U T I O N

<u>Addressee</u>	<u>No. of Copies</u>
To be specified in individual Task Orders	ORIGINAL AND THREE (3) COPIES
NAVAL MEDICAL LOGISTICS COMMAND ATTN: Code 02, Kathy E. Robinson 1681 NELSON STREET FORT DETRICK, MD 21702-9203	ONE (1) COPY

F.3 PERIOD OF PERFORMANCE

Performance under the initial Task Orders (Lots 1 through 3) shall be as follows:

Lot 1: Family Nurse Practitioner and Registered Nurses at Naval Medical Clinic, Quantico, VA, 1 Jun 2001 through 30 September 2001; Lot 2: Licensed Practical Nurses, Medical Assistants and Psychiatric Technician at Naval Medical Clinic, Quantico, VA, 1 Jun 2001 through 30 September 2001; Lot 3: Nurse Practitioner, Women's Health and Licensed Practical Nurses at National Naval Medical Center, Bethesda, MD , 1 Jun 2001 through 30 September 2001 and 29 July 2001 through 30 September 2001.

The period of performance for subsequent orders will be specified in each Task Order.

F.4 PLACE OF PERFORMANCE

The specific locations of services to be furnished will be identified in each Task Order. For the initial Task Orders, the place of performance will be as follows:

Lot 1: Family Nurse Practitioner and Registered Nurses at Naval Medical Clinic, Quantico, VA, 6 August 2001 through 30 September 2001; Lot 2: Licensed Practical Nurses, Medical Assistants and Psychiatric Technician at Naval Medical Clinic, Quantico, VA, 1 Jun 2001 through 30 September 2001; Lot 3: Nurse Practitioner, Women's Health and Licensed Practical Nurses at National Naval Medical Center, Bethesda, MD , 1 Jun 2001 through 30 September 2001 and 29 July 2001 through 30 September 2001.

F.5 INVOICING INSTRUCTIONS AND PAYMENT FOR SERVICES

(a) The contractor shall submit invoices in quadruplicate with a copy of the applicable Material Inspection and Receiving Report, DD Form 250, signed by the cognizant Government representative, stating thereon the name and title of the Government representative to whom delivery was made and the date of such delivery or period of performance.

(b) Invoices shall be submitted every two weeks to:

To be specified in
individual Task Orders

ORIGINAL AND THREE
COPIES

(c) The Government shall process invoices every two weeks for payment.

(END OF SECTION F)

SECTION G - CONTRACT ADMINISTRATION DATA

G.1 CONTRACTING OFFICERS REPRESENTATIVE (COR)

The Contracting Officer's Representative(s) (CORs), for the minimum order quantity will be appointed at time of award of the basic contract(s). As subsequent task orders are issued for services at additional medical treatment facilities which require appointment of a different COR, the COR will be appointed at the time of task order award. The COR shall perform the duties in accordance with the clause in Section E of this solicitation and DFARS 252.201-7000, CONTRACTING OFFICER'S REPRESENTATIVE. The Contracting Officer's Representative(s) are hereby designated the technical representatives of the Contracting Officer for the purpose of conducting all technical liaisons with the contractors. Such technical representatives are not authorized to direct or consent to any deviation from the specifications, scope of work and/or terms and conditions of this contract. Accordingly, no deviations thereto may be made without the prior written approval of the Contracting Officer.

G.2 CONTRACTS POINT OF CONTACT

(a) The Contracting Officer is the only person authorized to approve changes in any of the requirements of this contract and, notwithstanding provisions contained elsewhere in this contract, the said authority remains solely with the Contracting Officer. In the event the Contractor effects any change at the direction of any person other than the Contracting Officer, the change will be considered to have been made without the authority to do so and no adjustment will be made in the contract price to cover any increase in charges incurred as a result thereof. The name of the Procurement Contracting Officer is Ms. Shirley Overcash.

(b) The name and address of the Contract Specialist who is the point of contact prior to and after award is:

NAVAL MEDICAL LOGISTICS COMMAND
ATTN: Code 02, Kathy E. Robinson
1681 NELSON STREET
FORT DETRICK, MD 21702-9203
(301) 619-3020 [No collect calls]

(END OF SECTION G)

SECTION H - SPECIAL CONTRACT REQUIREMENTS

H.1 TASK ORDER CONTRACT.

The Government intends to award multiple indefinite delivery indefinite quantity (ID/IQ) contracts resultant from issuance of this solicitation. Services will be procured via the award of Task Orders issued against the basic contract. There are two procedures to be followed for the submission of offers for award of Task Orders.

- Initial Task Orders. The Government intends to award initial Task Orders to each offeror selected for contract award. Priced proposals for initial Task Orders must be submitted with each offeror's contract proposal and be responsive to the government requirements detailed in Section L of this solicitation. Initial Task Orders will order the contract minimum quantity of services required from each contract awardee. The type of services to be procured, as well as position specific duty descriptions for these initial Task Orders are provided as Attachments I through III to this solicitation.

Awardees of initial task orders (Lots 1 through 3) will be required to propose specific personnel within 30 days following contract award to satisfy the minimum quantity of health care workers. Awardees shall submit documentation required by Attachments I, II, and III for each of the health care workers proposed. The packages shall include documentary evidence that the proposed personnel meet the personnel requirements specified in Section C., Paragraph 6, Personnel Qualifications and the position specific statements of work. The Government will review the health care workers' Personnel Qualifications Statement to ensure the health care workers meet the minimum requirements of the contract. Upon determination that the health care worker meets requirements of the contract, the Government will then review the credentials/contract requirements packages as appropriate. Failure to meet the 30-day requirement may result in termination of the task order. Additionally, failure to submit complete packages within 30 days following contract award may be considered as negative past performance information that may jeopardize the award of future task orders, and/or may result in termination of the contract.

- Subsequent Task Orders. The Government intends to order additional services, up to the stated contract maximum quantities in Lots 4 and 5, throughout the life of this contract. Special procedures and regulations apply to the award of subsequently awarded Task Orders. These procedures are provided in Section H, paragraph 2 below.

H.2 TASK ORDER PROCEDURES (Subsequent Task Orders)

a. Fair Opportunity For Consideration

(1) One or more Task Orders may be issued during the performance period of this contract. The Government will provide all awardees a fair opportunity for consideration. Fair opportunity is not the same evaluation process used to make the initial award of the IDIQ contract. In accordance with FAR 16.505(b), the Contracting Officer will give each awardee a "fair opportunity" to be considered for each order in excess of \$2,500 unless one of the conditions in paragraph (2) below applies.

(2) Exceptions to Fair Opportunity for Consideration. Awardees will not be given a fair opportunity to be considered for Task Orders which are expected to exceed \$2,500 when the Contracting Officer determines one of the following conditions apply:

(a) The agency need for services is of such urgency that providing such an opportunity would result in unacceptable delays;

(b) Only one awardee is capable of providing the services required at the level of quality required because the services ordered are unique or highly specialized;

(c) The order should be issued on a sole-source basis in the interest of economy and efficiency as a logical follow-on to a Task Order already issued under this contract, provided that all awardees were given fair opportunity to be considered for the original order. For the purposes of this contract the Contracting Officer may negotiate a sole source logical follow-on Task Order with the current contractor providing previously competed services. In the event an

increase in the amount of previously competed services is required by the government, the contracting officer may negotiate a sole source logical follow-on task order with the current contractor provided the required additional services do not represent more than one full time equivalent position or 20% of the total competed labor hours for the affected labor category (categories), whichever is greater. A sole source logical follow-on must be for the same type of service previously competed at the same location(s). When deciding whether to negotiate a sole source logical follow-on task order with the current contractor consideration will be given to the contractor's past performance, continuity of health care worker services, and price.

(d) It is necessary to place an order to satisfy a minimum quantity.

(3) The Contracting Officer has broad discretion in determining which awardee should receive a Task Order. Proposed price, timeliness, and past performance will always be considered and, if specified in the Task Order Proposal Request, technical qualifications of the health care worker. The three (or four) factors are equally important unless otherwise specified in the Task Order Proposal Request. The Task Order may be awarded to other than the lowest priced offer. This decision shall consider the following factors:

(a) The proposed price of the Task Order.

(i) Completeness - All price information required by the Request for Proposal (RFP) has been submitted and tracks from Section B.

(ii) Reasonableness - The degree to which the proposed prices compare to the prices that a reasonable, prudent person would expect to incur for the same or similar services.

(iii) Realism - The offeror's CLIN/SLIN prices, and price breakdown structure(s) will be examined to identify unusually low price estimates, understatements of costs, inconsistent pricing patterns, potential misunderstandings of the solicitation requirements, and the risk of personnel recruitment and retention problems during contract performance.

(b) Timeliness of submission of Task Order proposal. Task Order proposals, which are submitted late (see Section H Paragraph 2.b.2 for submission instructions) may not be considered for award.

(c) The past performance and management record of the awardee in previous task orders, as well as task order proposals, under this contract or other current DOD task order contracts will be evaluated. This past performance evaluation shall include a review of performance problems, management problems, timeliness, reasonableness of prices, health care worker turnover (substitutions), shift fill rates, and quality of health care workers provided.

(d) If specified in the Task Order Proposal Request, quality of the health care worker(s) proposed under the task order. General quality ranking factors of health care workers are:

(i) The quality of the personnel labor mix proposed in relationship to the potential labor mix specified in the Task Order.

(ii) Quality and quantity of education/training and experience as it relates to the duties in the Task Order. Prior experience in a military medical setting may enhance the candidate's ranking.

(iii) Letters of Recommendation that include such items as clinical skills, professionalism or specific areas of expertise.

(iv) Additional certifications and licensure, as applicable.

(v) Total continuing education within the 3 years immediately preceding the task order.

(4) When placing orders, the Contracting Officer is not required to prepare formal evaluation plans, score offers, post notice in the Commerce Business Daily or hold discussions or negotiations with each awardee. Even

though the Contracting Officer does not have to comply with the competition rules in Part 6 of the Federal Acquisition Regulations and does not have to conduct discussions before issuing an order, there will be an internal record of why a particular offeror provided the best value based on the particular requirements of each Task Order.

(5) Issues arising from the placement of orders are not protestable to the General Accounting Office unless the protest alleges that the order exceeded the value, scope, or period of the contract.

b. TASK ORDER PROPOSAL REQUESTS

The process for requesting Task Order proposals, evaluating the proposals, selecting an awardee for each Task Order, issuing the Task Order, and the commencement of services under each Task Order is shown below.

(1) Task Order Proposal Request (TOPR) and Proposal Submission.

a. The Contracting Officer will issue a written Task Order Proposal Request (TOPR) and will forward it to all awardees unless one of the exceptions to the fair opportunity for consideration listed above in Section H, paragraph 2 (a)(2) applies. The TOPR will include as a minimum the following information:

- The due date for proposal submission.
- A description of the services, including minimum qualification requirements and specific ranking factors.
- The place of performance.
- The period of performance.
- Personnel quantities required.
- Any additional instructions for proposal submission not contained in this section.
- Any other information deemed appropriate by the Contracting Officer.

b. Task Order Price Proposals for initial Task Orders must be submitted with offeror's contract proposals. For future Task Orders, contractors will generally be given 30 days to prepare Task Order proposals which shall include pricing and technical packages. The due date for future Task Order proposals will be set forth in each TOPR. If an awardee is unable to submit a proposal, they must notify the Contracting Officer in writing as soon as practicable. A brief written statement as to why the awardee is unable to submit a proposal will be required.

c. Failure to submit a Task Order proposal may be considered as negative past performance information, which may jeopardize the award of future Task Orders.

(2) Proposal Submission.

a. Every Task Order Proposal Request will require offerors to submit a price proposal. The price proposal shall include a completed Supplemental Pricing Worksheet and, if required by the Task Order Proposal Request, a health care worker certificate of availability. The price proposal shall be forwarded only to the Naval Medical Logistics Command. Certified cost or pricing data is not required for individual Task Orders.

b. A Task Order Proposal Request will require offerors to submit a technical proposal. The technical proposal shall include a discussion of the offeror's past performance under current task order contracts issued by Department of Defense agencies other than Naval Medical Logistics command, or, in the absence of such experience, an affirmative statement to that effect. Additionally, the Task Order Proposal Request may include a requirement for offerors to submit information regarding the quality of health care workers to be used under the task order. Specific technical proposal content requirements will be provided in the Task Order Proposal Request. The technical proposal shall be forwarded to the requiring activity and to the Naval Medical Logistics Command, as specified in the Task Order Proposal Request.

(3) Task Order Award.

a. Upon completion of the evaluation of the technical (if required) and price sections, the Contracting Officer will issue a Task Order to the contractor whose proposal is most advantageous to the Government considering the evaluation factors specified in Section H, Paragraph 2.a.(3)above.

b. In the event issues pertaining to a proposed Task Order cannot be resolved to the satisfaction of the Contracting Officer, the Contracting Officer reserves the right to withdraw or cancel the proposed Task Order. In such event, the contractor shall be notified, via letter, of the Contracting Officer's decision and this decision shall be final and conclusive and shall not be subject to the "Disputes" clause or the "Contract Disputes Act".

(4) Commencement of Performance.

a. Upon award, a Task Order will be transmitted to the contractor on a DD Form 1155. Approved health care workers must begin performance no later than 30 days after execution of the Task Order by the Contracting Officer, unless otherwise mutually agreed. If a health care worker is not available to begin performance on the Task Order, the contractor must notify the Contracting Officer immediately.

b. Failure to begin performance with the approved health care worker may result in termination of the Task Order and reconsideration of the other Task Order proposals received in response to the Task Order Proposal Request. The contractor may or may not be given the opportunity to propose a new health care worker. The Government reserves the right to terminate the contract and/or Task Order for default if the contractor fails to begin performance.

H.3 OMBUDSMAN

The ombudsman shall review complaints from contractors regarding the award of Task Orders and ensure that all contractors are afforded a fair opportunity to be considered, consistent with the procedures in the contract. The Task Order contract ombudsman for this contract is the Navy Competition Advocate General. Contractors are encouraged to settle their complaints through the Competition Advocate chain of command, seeking review by the Command Competition Advocate at the Naval Medical Logistics Command before taking their complaints to the Navy Competition Advocate General. The Naval Medical Logistics Command's Competition Advocate can be reached at (301) 619-2158 or at the following address:

Naval Medical Logistics Command
ATTN: Executive Officer
1681 Nelson Street
Fort Detrick, MD 21702-9203
Fax Number: 301-619-7430

H.4 PRIOR WRITTEN PERMISSION REQUIRED FOR SUBCONTRACTS

None of the services required by this contract shall be subcontracted to or performed by persons other than the contractor or the contractor's employees without the prior written consent of the Contracting Officer.

H.5 RESTRICTION ON THE USE OF GOVERNMENT-AFFILIATED PERSONNEL

Without the written approval of the Contracting Officer, the contractor shall not use, in the performance of this contract, any U.S. Government employees or persons currently performing dental services on other Department of Defense contracts.

H.6 SUBSTITUTION OF PERSONNEL

(a) The contractor agrees to initiate performance of each Task Order using only the health care worker(s) whose professional qualifications have been determined technically acceptable by the Government.

(b) No personnel substitutions shall be made by the contractor without the express consent of the Contracting Officer. All substitution requests will be processed in accordance with this clause. The government retains the right to terminate

and re-compete a new task order.

(c) No personnel substitutions shall be permitted during the period beginning with Task Order award and continuing through the first 30 days of contract performance, unless they are necessitated by a health care worker's unexpected illness, injury, death or termination of employment. Should one of these events occur, the contractor shall promptly notify the Contracting Officer and provide the information required in paragraph (d) below. All substitution requests shall be submitted in writing and must provide the information required by paragraph (d) below.

(d) All substitution requests must provide a detailed explanation of the circumstances necessitating the proposed replacement of personnel. The contractor shall also demonstrate that the substitute health care worker(s) possess professional qualifications that meet the minimum requirements in this contract and in the position specific Statement of Work contained in the Task Order. In addition, all substitution requests shall include a Certificate of Availability signed and dated by each proposed health care worker, and any other information identified by the Contracting Officer. The Contracting Officer will evaluate such requests and promptly notify the contractor or the approval or disapproval thereof."

(e) The Government reserves the right to conduct interviews for substitute health care workers proposed.

H.7 CRIME CONTROL ACT OF 1990 REQUIREMENT

a. Section 21 of the Crime Control Act of 1990, 42 U.S.C. 13041, as amended by Section 1094 of Public Law 1-02-190, requires every facility operated by the Federal Government (or operated under contract with the Federal Government) that hires (or contracts to hire) individuals involved in the provision of child care services to assure that all existing and newly-hired employees undergo a criminal background check. The term "child care services" is defined to include health and mental health care.

b. The Government will conduct criminal background checks on all health care worker's providing child care services under this contract based on fingerprints of contractor employees obtained by a Government law enforcement officer and inquiries conducted through the Federal Bureau of Investigation (FBI) and State criminal history repositories. In doing so the Government shall follow the procedures set forth in DOD Instruction 1402.5.

c. Within 30 days after contract award, the contractor and all contractor employees shall provide all reasonable and necessary assistance to the Government, including compliance with the employment application requirements set forth in 42 U.S.C. 13041(d). Upon receipt of the results of a background check, the contractor further agrees to undertake a personnel action in accordance with 42 U.S.C. 13041(c), when appropriate.

d. With written recommendation from the Commanding Officer, and the approval one level above the Contracting officer, a contractor employee may be permitted to perform work under this contract prior to the completion of a background check, provided the employee is within sight and continuous supervision of an individual with a successful background check.

e. Contractor employees shall have the right to obtain a copy of any background check pertaining to themselves and to challenge the accuracy and completeness of the information contained in the report.

H.8 LIABILITY INSURANCE

Before commencing work under a contract, the Contractor shall certify to the Contracting Officer in writing that the required insurance has been obtained. The following insurance as referenced in FAR 28.307, is the minimum insurance required:

a. General Liability - Bodily injury liability insurance coverage written on the comprehensive form of policy of at least: \$500,000 per occurrence.

b. Automobile liability - Automobile liability insurance written on the comprehensive form of policy. The policy shall provide for bodily injury and property damage liability covering the operation of all automobiles used in connection with performing the contract. Policies covering automobiles operated in the United States shall provide

coverage of a least \$200,000 per person and \$500,000 per occurrence for bodily injury and \$20,000 per occurrence for property damage. The amount of liability coverage on other policies shall be commensurate with any legal requirements of the locality and sufficient to meet normal and customary claims.

c. Worker's compensation and employer's liability. Contractors are required to comply with applicable Federal and State Workers' compensation and occupational disease statutes. If occupational diseases are not compensable under those statutes, they shall be covered under the employer's liability section of the insurance policy, except when contractor operations are so commingled with a contractor's commercial operations that it would not be practical to require this coverage. Employer's liability coverage of at least \$100,000 shall be required, except in States with exclusive or monopolistic funds that do not permit workers' compensation to be written by private carriers.

H.9 INCENTIVE AWARDS.

The Government reserves the right to make incentive awards to healthcare workers, or directly to the contractor in task orders issued for the maximum order quantity. These awards will be site or position specific based upon the Government's best business practice plan to minimize turn-over, maximize the mission of the command and/or reward exemplary work. Incentive plans may be contained in the individual task orders for positions within the maximum quantities only. If the task order provides for an incentive award and one is actually made, the contractor shall pass all incentive fee award amounts to the contractor's healthcare worker(s). The contractor agrees to only make deductions to the Incentive Fee Award to remain in compliance with the laws and regulations of the Internal Revenue Service, state, and local taxation authorities. The amount paid to the HCW, by the contractor, shall not be reduced further.

H.10. INCENTIVE AWARD FEE GUIDANCE.

If utilized, the incentive award fee structure of this contract will consist of a NOT to Exceed (NTE) fixed incentive award fee amount outlined in each task order. The initial task orders awarded for Lots 1-3 with the basic contracts do not have incentive award fees.

If included in a task order, the NTE Fixed incentive award fee amount can be increased by the Contracting Officer only as a result of changes made to the Task Order Statement of Work authorized by the Contracting Officer via a written modification.

Evaluation procedures and criteria and scoring procedures shall be set forth in the Incentive Award Fee Plan, as addressed in each Task Order.

The total incentive award amount will be obligated at the beginning of the Task Order. The contractor shall be authorized in writing by the Contracting Officer to invoice for any incentive award fee earned during each Task Order in the Incentive Award Fee Plan.

END OF SECTION H

SECTION I - CONTRACT CLAUSES

I.1 CLAUSES INCORPORATED BY REFERENCE (FAR 52.252-2) (FEB 1998)

This contract incorporates one or more clauses by reference, with the same force and effect as if they were given in full text. Upon request, the Contracting Officer will make their full text available. Also, the full text of a clause may be accessed electronically at this address: <http://www.arnet.gov/far>.

FEDERAL ACQUISITION REGULATION (48 CFR CHAPTER 1) CLAUSES

<u>FAR CLAUSE</u>	<u>TITLE</u>	<u>DATE</u>
52.202-1	DEFINITIONS (ALTERNATE I)	OCT 1995 APR 1984
52.203-5	COVENANT AGAINST CONTINGENT FEES	APR 1984
52.203-6	RESTRICTIONS ON SUBCONTRACTOR SALES TO THE GOVERNMENT	JUL 1995
52.203-7	ANTI-KICKBACK PROCEDURES	JUL 1995
52.203-8	CANCELLATION RESCISSION, AND RECOVERY OF FUNDS FOR OF FUNDS FOR ILLEGAL OR IMPROPER ACTIVITY	JAN 1997
52.203-10	PRICE OR FEE ADJUSTMENT FOR ILLEGAL OR IMPROPER ACTIVITY	JAN 1997
52.203-12	LIMITATION ON PAYMENTS TO INFLUENCE CERTAIN FEDERAL	JUN 1997
52.204-4	PRINTED OR COPIED DOUBLE-SIDED ON RECYCLED PAPER	AUG 2000
52.209-6	PROTECTING THE GOVERNMENT'S INTEREST WHEN SUBCONTRACTING WITH CONTRACTORS DEBARRED, SUSPENDED, OR PROPOSED FOR DEBARMENT	JUL 1995
52.215-2	AUDIT AND RECORDS - NEGOTIATION	JUN 1999
52.215-8	ORDER OF PRECEDENCE-UNIFORM CONTRACT FORMAT	OCT 1997
52.222-3	CONVICT LABOR	AUG 1996
52.222-26	EQUAL OPPORTUNITY	FEB 1999
52.222-35	AFFIRMATIVE ACTION FOR DISABLED VETERANS AND VETERANS OF THE VIETNAM ERA	APR 1998
52.222-36	AFFIRMATIVE ACTION FOR WORKERS WITH DISABILITIES	JUN 1998
52.222-37	EMPLOYMENT REPORTS ON DISABLED VETERANS AND VETERANS OF THE VIETNAM ERA	JAN 1999
52.222-41	SERVICE CONTRACT ACT OF 1965, AS AMENDED	MAY 1989
52.222-44	FAIR LABOR STANDARDS ACT & SERVICE CONTRACT ACT- PRICE ADJUSTMENT	MAY 1989
52.223-5	POLLUTION PREVENTION AND RIGHT-TO-KNOW INFORMATION	APR 1998
52.223-6	DRUG-FREE WORKPLACE	JAN 1997
52.223-14	TOXIC CHEMICAL RELEASE REPORTING	OCT 2000
52.224-1	PRIVACY ACT NOTIFICATION	APR 1984
52.224-2	PRIVACY ACT	APR 1984
52.225-11	BUY AMERICAN ACT-BALANCE OF PAYMENTS PROGRAM -CONSTRUCTION MATERIALS UNDER TRADE AGREEMENTS RESTRICTIONS ON CERTAIN FOREIGN PURCHASES	FEB 2000 AUG 1998
52.227-1	AUTHORIZATION AND CONSENT	JUL 1995
52.228-5	INSURANCE - WORK ON A GOVERNMENT INSTALLATION	JAN 1997
52.229-3	FEDERAL, STATE, AND LOCAL TAXES	JAN 1991
52.229-5	TAXES - CONTRACTS PERFORMED IN U.S. POSSESSIONS OR PUERTO RICO	APR 1984
52.232-8	DISCOUNTS FOR PROMPT PAYMENT	MAY 1997
52.232-11	EXTRAS	APR 1984
52.232-17	INTEREST	JUN 1996
52.232-18	AVAILABILITY OF FUNDS	APR 1984
52.232-23	ASSIGNMENT OF CLAIMS	JAN 1986
52.232-25	PROMPT PAYMENT	JUN 1997
52.232-33	PAYMENT BY ELECTRONIC FUNDS TRANSFER -- CENTRAL CONTRACTOR REGISTRATION	MAY 1999
52.233-1	DISPUTES	DEC 1998

	(ALTERNATE I)	DEC 1991
52.233-3	PROTEST AFTER AWARD	AUG 1996
52.237-2	PROTECTION OF GOVERNMENT BUILDINGS, EQUIPMENT AND VEGETATION	APR 1984
52.237-3	CONTINUITY OF SERVICES	JAN 1991
52.242-13	BANKRUPTCY	JUL 1995
52.243-1	CHANGES - FIXED-PRICE	AUG 1987
	(ALTERNATE I)	APR 1984
52.244-6	SUBCONTRACTS FOR COMMERCIAL ITEMS AND COMMERCIAL COMPONENTS	OCT 1998
52.245-2	GOVERNMENT PROPERTY (FIXED PRICE CONTRACTS)	DEC 1989
	(ALTERNATE I)	APR 1984
52.246-25	LIMITATION OF LIABILITY - SERVICES	FEB 1997
52.249-8	DEFAULT (FIXED-PRICE SUPPLY AND SERVICE)	APR 1984
52.253-1	COMPUTER GENERATED FORMS	JAN 1991

DEFENSE FEDERAL ACQUISITION REGULATION SUPPLEMENT
(48 CFR CHAPTER 2) CLAUSES

DFARS CLAUSE	TITLE	DATE
252.203-7001	PROHIBITION ON PERSONS CONVICTED OF FRAUD OR OTHER DEFENSE-CONTRACT-RELATED FELONIES	MAR 1999
252.204-7003	CONTROL OF GOVERNMENT PERSONNEL WORK PRODUCT	APR 1992
252.205-7000	PROVISION OF INFORMATION TO COOPERATIVE AGREEMENT HOLDERS	DEC 1991
252.215-7000	PRICING ADJUSTMENTS	DEC 1991
252.223-7004	DRUG-FREE WORK FORCE	SEP 1988
252.223-7006	PROHIBITION ON STORAGE AND DISPOSAL OF TOXIC AND HAZARDOUS MATERIALS	APR 1993
252.242-7000	POSTAWARD CONFERENCE	DEC 1991
252.243-7001	PRICING OF CONTRACT MODIFICATIONS	DEC 1991

I.2 ORDERING (FAR 52.216-18) (OCT 1995)

(a) Any supplies and services to be furnished under this contract shall be ordered by issuance of delivery orders by the individuals or activities designated in the Schedule. Such orders may be issued from the date of contract award through a date to be determined, but not exceeding 60 months from contract award, or until all maximum quantities have been ordered, whichever occurs first.

(b) All delivery orders or task orders are subject to the terms and conditions of this contract. In the event of conflict between a delivery/task order and this contract, the contract shall control.

(c) If mailed, a delivery order or task order is considered "issued" when the Government deposits the order in the mail. Orders may be issued orally, by facsimile, or by electronic commerce methods only if authorized in the Schedule.

I.3 ORDER LIMITATIONS (FAR 52.216-19)(OCT 1995)

(a) Minimum Order. When the Government requires supplies or services covered by this contract in an amount of less than \$1,000, the Government is not obligated to purchase, nor is the contractor obligated to furnish, those supplies or services under the contract.

(b) Maximum Order. The contractor is not obligated to honor:

(1) Any order for a single item in excess of 100,000 hours per individual Line Item.

(2) Any order for services in excess of the maximum total requirement for this contract. (See Section B.11)

(c) Notwithstanding paragraphs (b) above, the contractor shall honor any order exceeding the maximum order limitations in paragraph (b), unless that order (or orders) is returned to the office within 30 days after issuance, with written notice stating the contractor's intent not to provide the services ordered and the reasons. Upon receiving this notice, the Government may acquire the services from another source.

I.4 INDEFINITE QUANTITY (FAR 52.216-22)(OCT 1995)

(a) This is an indefinite-quantity contract for the supplies or services specified, and effective for the period stated, in the Schedule. The quantities of supplies and services specified in the Schedule are estimates only and are not purchased by this contract.

(b) Delivery or performance shall be made only as authorized by orders issued in accordance with the Ordering clause. The contractor shall furnish to the Government, when and if ordered, the supplies or services specified in the Schedule up to and including the quantity designated in the schedule as the "maximum." The Government shall order at least the quantity of supplies or services designated in the Schedule as the "minimum."

(c) Except for any limitations on quantities in the Order Limitations clause or in the Schedule, there is no limit on the number of orders that may be issued. The Government may issue orders requiring delivery to multiple destinations or performance at multiple locations.

(d) Any order issued during the effective period of this contract and not completed within that period shall be completed by the contractor within the time specified in the order. The contract shall govern the contractor's and the Government's rights and obligations with respect to that order or the same extent as if the order were completed during the contract's effective period; provided, that the contractor shall not be required to make any deliveries under this contract after a date to be determined, but not exceeding 60 months from contract award.

I.5. NOTICE OF TOTAL SMALL BUSINESS SET-ASIDE FAR 52.219-6 (JUL 1996)

(a) *Definition.* "Small business concern," as used in this clause, means a concern, including its affiliates, that is independently owned and operated, not dominant in the field of operation in which it is bidding on Government contracts, and qualified as a small business under the size standards in this solicitation.

(b) *General.* (1) Offers are solicited only from small business concerns. Offers received from concerns that are not small business concerns shall be considered nonresponsive and will be rejected.

(2) Any award resulting from this solicitation will be made to a small business concern.

(c) *Agreement.* A small business concern submitting an offer in its own name agrees to furnish, in performing the contract, only end items manufactured or produced by small business concerns in the United States. The term "United States" includes its territories and possessions, the Commonwealth of Puerto Rico, the trust territory of the Pacific Islands, and the District of Columbia. If this procurement is processed under simplified acquisition procedures and the total amount of this contract does not exceed \$25,000, a small business concern may furnish the product of any domestic firm. This paragraph does not apply in connection with construction or service contracts.

I.6 LIMITATIONS ON SUBCONTRACTING (FAR 52.219-14) (DEC 1996)

(a) This clause does not apply to the unrestricted portion of a partial set-aside.

(b) By submission of an offer and execution of a contract, the Offeror/Contractor agrees that in performance of the contract in the case of a contract for--

(1) *Services (except construction).* At least 50 percent of the cost of contract performance incurred for personnel shall be expended for employees of the concern.

(2) *Supplies (other than procurement from a nonmanufacturer of such supplies).* The concern shall perform work for at least 50 percent of the cost of manufacturing the supplies, not including the cost of materials.

(3) *General construction.* The concern will perform at least 15 percent of the cost of the contract, not including the cost of materials, with its own employees.

(4) *Construction by special trade contractors.* The concern will perform at least 25 percent of the cost of the contract, not including the cost of materials, with its own employees.

I.7 STATEMENT OF EQUIVALENT RATES FOR FEDERAL HIRES
(FAR 52.222-42) (MAY 1989)

In compliance with the Service Contract Act of 1965, as amended, and the regulations of the Secretary of Labor (29 CFR Par 4), this clause identifies the classes of service employees expected to be employed under the contract and states the wages and fringe benefits payable to each if they were employed by the contracting agency subject to the provisions of 5 U.S.C. 5341 or 5332.

THIS STATEMENT IS FOR INFORMATION ONLY: IT IS NOT A WAGE DETERMINATION.

<u>Employee Class</u>	<u>Monetary</u>	<u>Wage</u>	<u>Fringe</u>	<u>Benefits</u>
-----------------------	-----------------	-------------	---------------	-----------------

Registered Nurse I, II, III, IV	\$26.09			GS/10-12
Licensed Practical Nurse I, II, III	\$16.61			GS/6
Medical Assistant	\$15.10			GS/5
Phlebotomist	\$16.61			GS/6

I.8. PAYMENTS UNDER PERSONAL SERVICES CONTRACTS (52.232-3) APR 1984

The Government shall pay the Contractor, upon submission of proper invoices or vouchers, the prices stipulated in this contract for work delivered or rendered and accepted, less any deductions provided in this contract. Unless otherwise specified, payment shall be made upon acceptance of any portion of the work delivered or rendered for which a price is separately stated in the contract.

I.9 TERMINATION (PERSONAL SERVICES) (FAR 52.249-12) APR 1984

The Government may terminate this contract at any time upon at least 15 days written notice by the Contracting Officer to the Contractor. The Contractor, with the written consent of the Contracting Officer, may terminate this contract upon at least 15 days written notice to the Contracting Officer.

I.10 CONTRACTING OFFICER'S REPRESENTATIVE (DFARS 252.201-7000) (DEC 1991)

(a) Definition. "Contracting officer's representative" means an individual designated in accordance with subsection 201.602-2 of the Defense Federal Acquisition Regulation Supplement and authorized in writing by the contracting officer to perform specific technical or administrative functions.

(b) If the Contracting Officer designates a contracting officer's representative (COR), the Contractor will receive a copy of the written designation. It will specify the extent of the COR's authority to act on behalf of the contracting officer.

The COR is not authorized to make any commitments or changes that will affect price, quality, quantity, delivery, or any other term or condition of the contract.

I.11. REQUIRED CENTRAL CONTRACTOR REGISTRATION (DFARS 252.204-7004) (MAR 2000)

(a) *Definitions.* As used in this clause-

(1) "Central Contractor Registration (CCR) database" means the primary DoD repository for contractor information required for the conduct of business with DoD.

(2) "Data Universal Number System (DUNS) number" means the 9-digit number assigned by Dun and Bradstreet Information Services to identify unique business entities.

(3) "Data Universal Numbering System +4 (DUNS+4) number" means the DUNS number assigned by Dun and Bradstreet plus a 4-digit suffix that may be assigned by a parent (controlling) business concern. This 4-digit suffix may be assigned at the discretion of the parent business concern for such purposes as identifying subunits or affiliates of the parent business concern.

(4) "Registered in the CCR database" means that all mandatory information, including the DUNS number or the DUNS+4 number, if applicable, and the corresponding Commercial and Government Entity (CAGE) code, is in the CCR database; the DUNS number and the CAGE code have been validated; and all edits have been successfully completed.

(b)(1) By submission of an offer, the offeror acknowledges the requirement that a prospective awardee must be registered in the CCR database prior to award, during performance, and through final payment of any contract resulting from this solicitation, except for awards to foreign vendors for work to be performed outside the United States.

(2) The offeror shall provide its DUNS or, if applicable, its DUNS+4 number with its offer, which will be used by the Contracting Officer to verify that the offeror is registered in the CCR database.

(3) Lack of registration in the CCR database will make an offeror ineligible for award.

(4) DoD has established a goal of registering an applicant in the CCR database within 48 hours after receipt of a complete and accurate application via the Internet. However, registration of an applicant submitting an application through a method other than the Internet may take up to 30 days. Therefore, offerors that are not registered should consider applying for registration immediately upon receipt of this solicitation.

(c) The Contractor is responsible for the accuracy and completeness of the data within the CCR, and for any liability resulting from the Government's reliance on inaccurate or incomplete data. To remain registered in the CCR database after the initial registration, the Contractor is required to confirm on an annual basis that its information in the CCR database is accurate and complete.

(d) Offerors and contractors may obtain information on registration and annual confirmation requirements by calling 1-888-227-2423, or via the Internet at <http://www.ccr2000.com>.

(END OF SECTION I)

PART III

LIST OF DOCUMENTS
EXHIBITS AND OTHER ATTACHMENTS

SECTION J - LIST OF ATTACHMENTS

J.1 LIST OF ATTACHMENTS

ATTACHMENT NUMBER	DESCRIPTION	PAGES	INCORPORATED DATE	ATTACHED?	BY REF?
I	Position Specific SOW/PQS- Lot 1	07	06 Dec 00	Yes	
II	Position Specific SOW/PQS - Lot 2	13	06 Dec 00	Yes	
III	Position Specific SOW/PQS - Lot 3	09	06 Dec 00	Yes	
IV	Supplemental Pricing Worksheet	01	02 Nov 00	Yes	
V	Health Care Worker Certificate of Availability	01	02 Nov 00	Yes	
VI	Notional Task Order 00001	04	02 Nov 00	Yes	
VII	Notional Task Order 00002	02	02 Nov 00	Yes	
VIII	List of Acceptable Documents	02	21 Nov 91	Yes	
IX	DOL Wage Determination #92-2103	08	13 Sep 00	Yes	
X	DOL Wage Determination #92-2247	08	15 Sep 00	Yes	
XI	NAVMED P-117, Change 107	02	29 Oct 92	Yes	
XII	Section L, Management Plan; Offeror's Technical Proposal Format	05	06 Dec 00	Yes	
XIII	Section L, Past Performance Table	02	20 Jan 00	Yes	
XIV	Offeror's Management Plan	TBD	TBD	T/B incorporated upon award	
XV	Contract Administration Plan	TBD	TBD	To be provided by amendment	
XVI	Information from Existing Contracts	01	06 Dec 00	Yes	

J.2 LIST OF EXHIBITS

EXHIBIT	DESCRIPTION	PAGES	DATE	ATTACHED/BY REFERENCE?
---------	-------------	-------	------	------------------------

THERE ARE NO EXHIBITS FOR THIS CONTRACT.

END OF SECTION J

SECTION K - REPRESENTATIONS, CERTIFICATIONS AND OTHER
STATEMENTS OF OFFERS

K.1 CERTIFICATE OF INDEPENDENT PRICE DETERMINATION (FAR 52.203-2)
(APR 1985)

(a) The offeror certifies that -

(1) The prices in this offer have been arrived at independently, without, for the purpose of restricting competition, any consultation, communication, or agreement with any other offeror or competitor relating to (i) those prices, (ii) the intention to submit an offer, or (iii) the methods or factors used to calculate the prices offered;

(2) The prices in this offer have not been and will not be knowingly disclosed by the offeror, directly or indirectly, to any other offeror or competitor before bid opening (in the case of a sealed bid solicitation) or contract award (in the case of a negotiated solicitation) unless otherwise required by law; and

(3) No attempt has been made or will be made by the offeror to induce any other concern to submit or not to submit an offer for the purpose of restricting competition.

(b) Each signature on the offer is considered to be a certification by the signatory that the signatory -

(1) Is the person in the offeror's organization responsible for determining the prices being offered in this bid or proposal, and that the signatory has not participated and will not participate in any action contrary to subparagraphs (a)(1) through (a)(3) above; or

(2)(i) Has been authorized, in writing, to act as agent for the following principals in certifying that those principals have not participated, and will not participate in any action contrary to subparagraphs (a)(1) through (a)(3) above

_____ insert full name of person(s) in the offeror's organization responsible for determining the prices offered in this bid or proposal, and the title of his or her position in the offeror's organization.

(ii) As an authorized agent, does certify that the principals named in subdivision (b)(2)(i) above have not participated, and will not participate, in any action contrary to subparagraphs (a)(1) through (a)(3) above; and

(iii) As an agent, has not personally participated, and will not participate, in any action contrary to subparagraphs (a)(1) through (a)(3) above.

(c) If the offeror deletes or modifies subparagraph (a)(2) above, the offeror must furnish with its offer a signed statement setting forth in detail the circumstances of the disclosure.

K.2 CERTIFICATION AND DISCLOSURE REGARDING PAYMENTS TO INFLUENCE
CERTAIN FEDERAL TRANSACTIONS (FAR 52.203-11) (APR 1991)

(a) The definitions and prohibitions contained in the clause, at FAR 52.203-12, Limitation on Payments to Influence Certain Federal Transactions, included in this solicitation, are hereby incorporated by reference in paragraph (b) of this certification.

(b) The offeror, by signing its offer, hereby certifies to the best of his or her knowledge and belief that on or after December 23, 1989--

(1) No Federal appropriated funds have been paid or will be paid to any person for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress on his or her behalf in connection with the awarding of any Federal contract, the making of any Federal grant, the making of any Federal loan, the entering into of any cooperative

agreement, and the extension, continuation, renewal, amendment or modification of any Federal contract, grant, loan, or cooperative agreement;

(2) If any funds other than Federal appropriated funds (including profit or fee received under a covered Federal transaction) have been paid, or will be paid, to any person for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress on his or her behalf in connection with this solicitation, the offeror shall complete and submit, with its offer, OMB standard form LLL, Disclosure of Lobbying Activities, to the Contracting Officer; and

(3) He or she will include the language of this certification in all subcontract awards at any tier and require that all recipients of subcontract awards in excess of \$100,000 shall certify and disclose accordingly.

(c) Submission of this certification and disclosure is a prerequisite for making or entering into this contract imposed by section 1352, title 31, United States Code. Any person who makes an expenditure prohibited under this provision or who fails to file or amend the disclosure form to be filed or amended by this provision, shall be subject to a civil penalty of not less than \$10,000, and not more than \$100,000, for each such failure.

K.3 TAXPAYER IDENTIFICATION (FAR 52.204-3) (OCT 1998)

(a) *Definitions.*

"*Common parent*," as used in this solicitation provision, means that corporate entity that owns or controls an affiliated group of corporations that files its Federal income tax returns on a consolidated basis, and of which the offeror is a member.

"*Taxpayer Identification Number (TIN)*," as used in this provision, means the number required by the Internal Revenue Service (IRS) to be used by the offeror in reporting income tax and other returns. The TIN may be either a Social Security Number or an Employer Identification Number.

(b) All offerors must submit the information required in paragraphs (d) through (f) of this provision to comply with debt collection requirements of 31 U.S.C. 7701(c) and 3325(d), reporting requirements of 26 U.S.C. 6041, 6041A, and 6050M and implementing regulations issued by the IRS. If the resulting contract is subject to the reporting requirements described in Federal Acquisition Regulation (FAR) 4.904, the failure or refusal by the offeror to furnish the information may result in a 31 percent reduction of payments otherwise due under the contract.

(c) The TIN may be used by the Government to collect and report on any delinquent amounts arising out of the offeror's relationship with the government (31 U.S.C. 7701(c)(3)). If the resulting contract is subject to the payment reporting requirements described in FAR 4.904, the TIN provided hereunder may be matched with IRS records to verify the accuracy of the offeror's TIN.

(d) *Taxpayer Identification Number (TIN).*

- * TIN: _____.
- * TIN has been applied for.
- * TIN is not required because:
 - * Offeror is a nonresident alien, foreign corporation, or foreign partnership that does not have income effectively connected with the conduct of a trade or business in the United States and does not have an office or place of business or a fiscal paying agent in the United States;
 - * Offeror is an agency or instrumentality of a foreign government;
 - * Offeror is an agency or instrumentality of a Federal Government;
 - * Other. State basis. _____

(e) *Type of organization.*

- * Sole proprietorship;
- * Partnership;
- * Corporate entity (not tax-exempt):
- * Corporate entity (tax-exempt):

- * Government entity (Federal, State, or local);
- * Foreign government;
- * International organization per 26 CFR 1.6049-4;
- * Other _____.

(f) *Common Parent.*

- * Offeror is not owned or controlled by a common parent as defined in paragraph (a) of this provision.
- * Name and TIN of common parent:
Name _____
TIN _____

K.4 DATA UNIVERSAL NUMBERING SYSTEM (DUNS) NUMBER (FAR 52.204-6) (JUN 1999)

(a) The offeror shall enter, in the block with its name and address on the cover page of its offer, the annotation "DUNS" followed by the DUNS number that identifies the offeror's name and address exactly as stated in the offer. The DUNS number is a nine-digit number assigned by Dun and Bradstreet Information Services.

(b) If the offeror does not have a DUNS number, it should contact Dun and Bradstreet directly to obtain one. A DUNS number will be provided immediately by telephone at no charge to the offeror. For information on obtaining a DUNS number, the offeror, if located within the United States, should call Dun and Bradstreet at 1-800-333-0505. The offeror should be prepared to provide the following information:

- (1) Company name.
- (2) Company address.
- (3) Company telephone number.
- (4) Line of business.
- (5) Chief executive officer/key manager.
- (6) Date the company was started.
- (7) Number of people employed by the company.
- (8) Company affiliation.

(c) Offerors located outside the United States may obtain the location and phone number of the local Dun and Bradstreet Information Services office from the Internet home page at <http://www.customerservice@dnb.com>. If an offeror is unable to locate a local service center, it may send an e-mail to Dun and Bradstreet at globalinfo@mail.dnb.com.

K.5. CERTIFICATION REGARDING DEBARMENT, SUSPENSION, PROPOSED DEBARMENT, AND OTHER RESPONSIBILITY MATTERS (FAR 52.209-5) (MAR 1996)

(a)(1) The Offeror certifies, to the best of its knowledge and belief, that--

(i) The Offeror and/or any of its Principals--

(A) Are * are not * presently debarred, suspended, proposed for debarment, or declared ineligible for the award of contracts by any Federal agency;

(B) Have * have not *, within a three-year period preceding this offer, been convicted of or had a civil judgment rendered against them for: commission of fraud or a criminal offense in connection with obtaining, attempting to obtain, or performing a public (Federal, state, or local) contract or subcontract; violation of Federal or state antitrust statutes relating to the submission of offers; or commission of embezzlement, theft, forgery, bribery, falsification or destruction of records, making false statements, tax evasion, or receiving stolen property; and

(C) Are * are not * presently indicted for, or otherwise criminally or civilly charged by a governmental entity with, commission of any of the offenses enumerated in subdivision (a)(1)(i)(B) of this provision.

(ii) The Offeror has * has not *, within a three-year period preceding this offer, had one or more contracts terminated for default by any Federal agency.

(2) "Principals," for the purposes of this certification, means officers; directors; owners; partners; and, persons having primary management or supervisory responsibilities within a business entity (*e.g.*, general manager; plant manager; head of a subsidiary, division, or business segment, and similar positions).

(a) This Certification Concerns a Matter Within the Jurisdiction of an Agency of the United States and the Making of a False, Fictitious, or Fraudulent Certification May Render the Maker Subject to Prosecution Under Section 1001, Title 18, United States Code.

(b) The Offeror shall provide immediate written notice to the Contracting Officer if, at any time prior to contract award, the Offeror learns that its certification was erroneous when submitted or has become erroneous by reason of changed circumstances.

(c) A certification that any of the items in paragraph (a) of this provision exists will not necessarily result in withholding of an award under this solicitation. However, the certification will be considered in connection with a determination of the Offeror's responsibility. Failure of the Offeror to furnish a certification or provide such additional information as requested by the Contracting Officer may render the Offeror nonresponsible.

(d) Nothing contained in the foregoing shall be construed to require establishment of a system of records in order to render, in good faith, the certification required by paragraph (a) of this provision. The knowledge and information of an Offeror is not required to exceed that which is normally possessed by a prudent person in the ordinary course of business dealings.

(e) The certification in paragraph (a) of this provision is a material representation of fact upon which reliance was placed when making award. If it is later determined that the Offeror knowingly rendered an erroneous certification, in addition to other remedies available to the Government, the Contracting Officer may terminate the contract resulting from this solicitation for default.

K.6 SMALL BUSINESS PROGRAM REPRESENTATIONS (FAR 52.219-1) (Oct 2000)

(a)

(1) The North American Industry Classification System (NAICS) code for this acquisition is 621399 [*insert NAICS code*].

(2) The small business size standard is 5 million [*insert size standard*].

(3) The small business size standard for a concern which submits an offer in its own name, other than on a construction or service contract, but which proposes to furnish a product which it did not itself manufacture, is 500 employees.

(b) *Representations.*

(1) The offeror represents as part of its offer that it * is, * is not a small business concern.

(2) (Complete only if the offeror represented itself as a small business concern in paragraph (b)(1) of this provision.) The offeror represents, for general statistical purposes, that it * is, * is not, a small disadvantaged business concern as defined in 13 CFR 124.1002.

(3) (Complete only if the offeror represented itself as a small business concern in paragraph (b)(1) of this provision.) The offeror represents as part of its offer that it * is, * is not a women-owned small business concern.

(4) (Complete only if the offeror represented itself as a small business concern in paragraph (b)(1) of this provision.) The offeror represents as part of its offer that it * is, * is not a veteran-owned small business concern.

(5) (Complete only if the offeror represented itself as a veteran-owned small business concern in paragraph (b)(4) of this provision.) The offeror represents as part of its offer that is * is, * is not a service-disabled veteran-owned small business concern.

(c) *Definitions.* As used in this provision--

"Service-disabled veteran-owned small business concern"-

(1) Means a small business concern-

(i) Not less than 51 percent of which is owned by one or more service-disabled veterans or, in the case of any publicly owned business, not less than 51 percent of the stock of which is owned by one or more service-disabled veterans; and

(ii) The management and daily business operations of which are controlled by one or more service-disabled veterans or, in the case of a veteran with permanent and severe disability, the spouse or permanent caregiver of such veteran.

(2) Service-disabled veteran means a veteran, as defined in 38 U.S.C. 101(2), with a disability that is service-connected, as defined in 38 U.S.C. 101(16).

"Small business concern," means a concern, including its affiliates, that is independently owned and operated, not dominant in the field of operation in which it is bidding on Government contracts, and qualified as a small business under the criteria in 13 CFR Part 121 and the size standard in paragraph (a) of this provision.

"Veteran-owned small business concern" means a small business concern-

(1) Not less than 51 percent of which is owned by one or more veterans (as defined at 38 U.S.C. 101(2)) or, in the case of any publicly owned business, not less than 51 percent of the stock of which is owned by one or more veterans; and

(2) The management and daily business operations of which are controlled by one or more veterans.

"Women-owned small business concern," means a small business concern --

(1) Which is at least 51 percent owned by one or more women or, in the case of any publicly owned business, at least 51 percent of the stock of which is owned by one or more women; and

(2) Whose management and daily business operations are controlled by one or more women.

(d) *Notice.*

(1) If this solicitation is for supplies and has been set aside, in whole or in part, for small business concerns, then the clause in this solicitation providing notice of the set-aside contains restrictions on the source of the end items to be furnished.

(2) Under 15 U.S.C. 645(d), any person who misrepresents a firm's status as a small, HUBZone small, small disadvantaged, or women-owned small business concern in order to obtain a contract to be awarded under the preference programs established pursuant to section 8(a), 8(d), 9, or 15 of the Small Business Act or any other provision of Federal law that specifically references section 8(d) for a definition of program eligibility, shall --

(i) Be punished by imposition of fine, imprisonment, or both;

(ii) Be subject to administrative remedies, including suspension and debarment; and

(iii) Be ineligible for participation in programs conducted under the authority of the Act.

K.7 PROHIBITION OF SEGREGATED FACILITIES (FAR 52.222-21) (FEB 1999)

(a) "Segregated facilities," as used in this clause, means any waiting rooms, work areas, rest rooms and wash rooms, restaurants and other eating areas, time clocks, locker rooms and other storage or dressing areas, parking lots, drinking fountains, recreation or entertainment areas, transportation, and housing facilities provided for employees, that are segregated by explicit directive or are in fact segregated on the basis of race, color, religion, sex or national origin because of written or oral policies, or employee custom. The term does not include separate or single-user rest rooms and necessary dressing or sleeping areas, which shall be provided to assure privacy between the sexes.

(b) The Contractor agrees that it does not and will not maintain or provide for its employees any segregated facilities at any of its establishments, and that it does not and will not permit its employees to perform their services at any location under its control where segregated facilities are maintained. The Contractor agrees that a breach of this clause is a violation of the Equal Opportunity clause in this contract.

(c) The Contractor shall include this clause in every subcontract that contains the clause of this contract entitled "Equal Opportunity."

K.8 PREVIOUS CONTRACTS AND COMPLIANCE REPORTS (FAR 52.222-22)
(FEB 1999)

The offeror represents that--

(a) It ☐ has, ☐ has not participated in a previous contract or subcontract subject to the Equal Opportunity clause of this solicitation,

(b) It ☐ has, ☐ has not, filed all required compliance reports; and

(c) Representations indicating submission of required compliance reports, signed by proposed subcontractors, will be obtained before subcontract awards.

K.9 AFFIRMATIVE ACTION COMPLIANCE (FAR 52.222-25) (APR 1984)

The offeror represents that (a) it ☐ has developed and has on file, ☐ has not developed and does not have on file, at each establishment, affirmative action programs required by the rules and regulations of the Secretary of Labor (41 CFR 60-1 and 60-2), or (b) it ☐ has not previously had contracts subject to the written affirmative action programs requirement of the rules and regulations of the Secretary of Labor.

K.10 CERTIFICATION OF TOXIC CHEMICAL RELEASE REPORTING (FAR 52.223-13) (OCT 2000)

(a) Submission of this certification is a prerequisite for making or entering into this contract imposed by Executive Order 12969, August 8, 1995.

(b) By signing this offer, the offeror certifies that --

(1) As the owner or operator of facilities that will be used in the performance of this contract that are subject to the filing and reporting requirements described in section 313 of the Emergency Planning and Community Right-to-Know Act of 1986 (EPCRA) (42 U.S.C. 11023) and section 6607 of the Pollution Prevention Act of 1990 (PPA) (42 U.S.C. 13106), the offeror will file and continue to file for such facilities for the life of the contract the Toxic Chemical Release Inventory Form (Form R) as described in sections 313(a) and (g) of EPCRA and section 6607 of PPA; or

(2) None of its owned or operated facilities to be used in the performance of this contract is subject to the Form R filing and reporting requirements because each such facility is exempt for at least one of the following reasons:
[Check each block that is applicable.]

* (i) The facility does not manufacture, process, or otherwise use any toxic chemicals listed under section 313(c) of EPCRA, 42 U.S.C. 11023(c);

* (ii) The facility does not have 10 or more full-time employees as specified in section 313(b)(1)(A) of EPCRA, 42 U.S.C. 11023(b)(1)(A);

* (iii) The facility does not meet the reporting thresholds of toxic chemicals established under section 313(f) of EPCRA, 42 U.S.C. 11023(f) (including the alternate thresholds at 40 CFR 372.27, provided an appropriate certification form has been filed with EPA);

* (iv) The facility does not fall within Standard Industrial Classification Code (SIC) major groups 20 through 39 or their corresponding North American Industry Classification System (NAICS) sectors 31 through 33; or

* (v) The facility is not located within any State of the United States, the District of Columbia, the Commonwealth of Puerto Rico, Guam, American Samoa, the United States Virgin Islands, the Northern Mariana Islands, or any other territory or possession over which the United States has jurisdiction.

(End of Provision)

K.11 TOXIC CHEMICAL RELEASE REPORTING (FAR 52.223-14) (Oct 2000)

(a) Unless otherwise exempt, the Contractor, as owner or operator of a facility used in the performance of this contract, shall file by July 1 for the prior calendar year an annual Toxic Chemical Release Inventory Form (Form R) as described in sections 313(a) and (g) of the Emergency Planning and Community Right-to-Know Act of 1986 (EPCRA) (42 U.S.C. 11023(a) and (g)), and section 6607 of the Pollution Prevention Act of 1990 (PPA) (42 U.S.C. 13106). The Contractor shall file, for each facility subject to the Form R filing and reporting requirements, the annual Form R throughout the life of the contract.

(b) A Contractor owned or operated facility used in the performance of this contract is exempt from the requirement to file an annual Form R if --

(1) The facility does not manufacture, process, or otherwise use any toxic chemicals listed under section 313(c) of EPCRA, 42 U.S.C. 11023(c);

(2) The facility does not have 10 or more full-time employees as specified in section 313(b)(1)(A) of EPCRA, 42 U.S.C. 11023(b)(1)(A);

(3) The facility does not meet the reporting thresholds of toxic chemicals established under section 313(f) of EPCRA, 42 U.S.C. 11023(f) (including the alternate thresholds at 40 CFR 372.27, provided an appropriate certification form has been filed with EPA);

(4) The facility does not fall within Standard Industrial Classification Code (SIC) major groups 20 through 39 or their corresponding North American Industry Classification System (NAICS) sectors 31 through 33; or

(5) The facility is not located within any State of the United States, the District of Columbia, the Commonwealth of Puerto Rico, Guam, American Samoa, the United States Virgin Islands, the Northern Mariana Islands, or any other territory or possession over which the United States has jurisdiction.

(c) If the Contractor has certified to an exemption in accordance with one or more of the criteria in paragraph (b) of this clause, and after award of the contract circumstances change so that any of its owned or operated facilities used in the performance of this contract is no longer exempt --

(1) The Contractor shall notify the Contracting Officer; and

(2) The Contractor, as owner or operator of a facility used in the performance of this contract that is no longer exempt, shall --

(i) Submit a Toxic Chemical Release Inventory Form (Form R) on or before July 1 for the prior calendar year during which the facility becomes eligible; and

(ii) Continue to file the annual Form R for the life of the contract for such facility.

(d) The Contracting Officer may terminate this contract or take other action as appropriate, if the Contractor fails to comply accurately and fully with the EPCRA and PPA toxic chemical release filing and reporting requirements.

(e) Except for acquisitions of commercial items as defined in FAR Part 2, the Contractor shall --

(1) For competitive subcontracts expected to exceed \$100,000 (including all options), include a solicitation provision substantially the same as the provision at FAR 52.223-13, Certification of Toxic Chemical Release Reporting; and

(2) Include in any resultant subcontract exceeding \$100,000 (including all options), the substance of this clause, except this paragraph (e).

K.12 COMMERCIAL AND GOVERNMENT ENTITY (CAGE) CODE REPORTING
(DFARS 252.204-7001) (AUG 1999)

(a) The offeror is requested to enter its CAGE code on its offer in the block with its name and address. The CAGE code entered must be for that name and address. Enter "CAGE" before the number.

(b) If the offeror does not have a CAGE code, it may ask the Contracting Officer to request one from the Defense Logistics Information Service (DLIS). The Contracting Officer will-

(1) Ask the Contractor to complete section B of a DD Form 2051, Request for Assignment of a Commercial and Government Entity (CAGE) Code;

(2) Complete section A and forward the form to DLIS; and

(3) Notify the Contractor of its assigned CAGE code.

(c) Do not delay submission of the offer pending receipt of a CAGE code.

**K.13 DISCLOSURE OF OWNERSHIP OR CONTROL BY THE GOVERNMENT OF A
TERRORIST COUNTRY (DFARS 252.209-7001) (MAR 1998)**

(a) Definitions. As used in this provision--

(1) "Government of a terrorist country" includes the state and the government of a terrorist country, as well as any political subdivision, agency, or instrumentality thereof.

(2) "Terrorist country" means a country determined by the Secretary of State, under section 6(j)(1)(A) of the Export Administration Act of 1979 (50 U.S.C. App. 2405(j)(i)(A)), to be a country the government of which has repeatedly provided support for acts of international terrorism. As of the date of this provision, terrorist countries include: Cuba, Iran, Iraq, Libya, North Korea, Sudan, and Syria.

(3) "Significant interest" means-

(i) Ownership of or beneficial interest in 5 percent or more of the firm's or subsidiary's securities. Beneficial interest includes holding 5 percent or more of any class of the firm's securities in "nominee shares", "street names", or some other method of holding securities that does not disclose the beneficial owner;

(ii) Holding a management position in the firm such as director or officer;

(iii) Ability to control or influence the election, appointment, or tenure of directors or officers in the firm;

(iv) Ownership of 10 percent or more of the assets of a firm such as equipment, buildings, real estate, or other tangible assets of the firm; or

(v) Holding 50 percent or more of the indebtedness of a firm.

(b) Prohibition on award. In accordance with 10 U.S.C. 2327, no contract may be awarded to a firm or a subsidiary of a firm if the government of a terrorist country has a significant interest in the firm or subsidiary or, in the case of a subsidiary, the firm that owns the subsidiary, unless a waiver is granted by the Secretary of Defense.

(c) Disclosure. If the government of a terrorist country has a significant interest in the offeror or a subsidiary of the offeror, the offeror shall disclose such interest in an attachment to its offer. If the offeror is a subsidiary, it shall also disclose any significant interest the government of a terrorist country has in any firm that owns or control the subsidiary. The disclosure shall include--

- (1) Identification of each government holding a significant interest; and
- (2) A description of the significant interest held by each government.

K.14 COMPLIANCE WITH VETERANS' EMPLOYMENT REPORTING REQUIREMENTS
(DFARS 252.209-7003) (MAR 1998)

By submission of its offer, the offeror represents that, if it is subject to the reporting requirements of 38 U.S.C. 4212(d) (i.e., the VETS-100 report required by Federal Acquisition Regulation clause 52.222-37, Employment Reports on Disabled Veterans and Veterans of the Vietnam Era), it has submitted the most recent report required by 38 U.S.C. 4212(d).

(END OF SECTION K)

SECTION L - INSTRUCTIONS, CONDITIONS, AND NOTICES TO OFFERORS

L.1 SOLICITATION PROVISIONS INCORPORATED BY REFERENCE (FAR 52.252-1) (FEB 1998)

This solicitation incorporates one or more solicitation provisions by reference, with the same force and effect as if they were given in full text. Upon request, the Contracting Officer will make their full text available. The offeror is cautioned that the listed provisions may include blocks that must be completed by the offeror and submitted with its quotation or offer. In lieu of submitting the full text of those provisions, the offeror may identify the provision by paragraph identifier and provide the appropriate information with its quotation or offer. Also, the full text of a solicitation provision may be accessed electronically at this address: <http://www.arnet.gov/far>.

<u>FAR CLAUSE</u>	<u>TITLE</u>	<u>DATE</u>
52.215-1	INSTRUCTIONS TO OFFERORS – COMPETITIVE ACQUISITION	FEB 2000
52.222-24	PREAWARD ON-SITE EQUAL OPPORTUNITY COMPLIANCE EVALUATION	FEB 1999
52.222-46	EVALUATION OF COMPENSATION FOR PROFESSIONAL EMPLOYEES	FEB 1993
52.237-1	SITE VISIT	APR 1984
52.237-10	IDENTIFICATION OF UNCOMPENSATED OVERTIME	OCT 1997

L.2 TYPE OF CONTRACT (FAR 52.216-1) (APR 1984)

The Government contemplates award of a Firm Fixed Price, Indefinite Delivery-Indefinite Quantity, Personal Service contract(s) resulting from this solicitation.

L.3 SINGLE OR MULTIPLE AWARDS (FAR 52.216-27) (OCT 1995)

The Government elects to award three (3) delivery order contracts or task order contracts for the same or similar supplies or services under this solicitation.

L.4 SERVICE OF PROTEST (FAR 52.233-2) (AUG 1996)

(a) Protests, as defined in Section 33.101 of the Federal Acquisition Regulation, that are filed directly with an agency, and copies of any protests that are filed with the General Accounting Office (GAO), shall be served on the Contracting Officer (addressed as follows) by obtaining written and dated acknowledgment of receipt from:

NAVAL MEDICAL LOGISTICS COMMAND
ATTN: CODE 02, Ms. Shirley Overcash
1681 NELSON STREET
FORT DETRICK, MD 21702-9203

(b) The copy of any protest shall be received in the office designated above within one day of filing a protest with the GAO.

L.5 SUBMISSION OF COST OR PRICING DATA

(a) It is expected that this contract will be awarded based upon a determination that there is adequate price competition; therefore, the offeror is not required to submit additional cost or price data or certify cost or pricing data with its proposal.

(b) If, after receipt of the proposals, the Contracting Officer determines that adequate price competition does not exist in accordance with FAR 15.403-3 and 15.403-4, the offeror shall provide other information requested to be submitted to determine fair and reasonableness of price or cost realism, or certified cost or pricing data as requested by the Contracting Officer.

L.6 NOTIONAL TASK ORDERS

The Notional Task Order(s) provided by Section J, Attachments VI and VII represent sample task order scenarios which may, in some form, be ordered by the Government after contract award. These Notional Task Orders are sample task orders to be used for offer and evaluation purposes in accordance with L.7 below. Award of a Task Order will not result from an offeror's proposal in response to a Notional Task Order.

L.7 INSTRUCTIONS FOR PREPARATION OF PROPOSALS

L.7.1 Introduction and Purpose. This section specifies the format and content that offerors shall use in response to this Request for Proposal (RFP). The intent is not to restrict the offerors in the manner in which they will perform their work but rather to ensure a certain degree of uniformity in the format of the responses for evaluation purposes. Offerors must submit a proposal that is in the format prescribed by paragraph L.7.1.1 and is comprehensive enough to provide the basis for a sound evaluation by the Government. Information provided should be precise, factual, and complete. Clarity, completeness, and responsiveness are of the utmost importance. Any proposal that does not offer as a minimum, that which is requested in this solicitation may be determined to be substantially incomplete and not warrant any further consideration.

L.7.1.1 Proposals shall be submitted electronically. Upon receipt of the electronic files from the contracting officer the offeror's proposal shall be submitted on 6 offeror provided 3.5" diskettes as follows:

a. Diskettes 1 and 2 shall each contain the offeror's Past Performance information and shall contain the file Past Performance.doc (Attachment XIII). The information on diskette 2 shall mirror the information on diskette 1.

b. Diskettes 3 and 4 shall each contain the offeror's Business Proposal and shall include the files Electronic Schedule B.xls, NTO0001.xls, NTO0002.xls, and Section K.doc. Included within Electronic Schedule B.xls, NTO001.xls, and NTO002.xls are Supplemental Pricing Worksheets for each separately priced position (Attachment IV). The offeror shall also complete the supplemental pricing worksheets and the Sources tab within each spreadsheet, supplying the information used for the basis of proposed compensation rates, benefits and, all market surveys performed. The information on diskette 4 shall mirror the information on diskette 3.

c. Diskettes 5 and 6 shall each contain the offeror's Management Plan and shall contain the file Management Plan.doc (Attachment XII). The information on diskette 5 shall mirror the information on diskette 6.

The closing date for Diskettes 1 through 6 shall be 19 Jan 01 at 2:00 PM local time (Eastern Standard Time).

If an offeror is late submitting (a) any diskette, or (b) any diskette required file is missing from their proposal, their entire proposal will be considered late.

Offerors are responsible for assuring that the diskettes forwarded in response to this solicitation are neither damaged nor unreadable. Diskettes 1 through 6 shall be 3.5" diskettes formatted by either Microsoft Windows 95™ or Microsoft Windows 98™. All files shall be submitted using either Microsoft Word 97™ (for the .doc files) or Microsoft Excel 97™ (for the .xls files). Diskettes 1 and 2 contain mirror files, diskettes 3 and 4 contain mirror files and, diskettes 5 and 6 contain mirror files. Offerors shall assure that all files are in a "read only" format and not subject to change. Files shall not be password protected.

Offerors shall accept the formatting, style, pitch/point, margins and other formatting imbedded in these electronic documents as provided by E-mail. The Government will accept no changes.

L.7.1.2 Diskettes 1 and 2: Past Performance

a. The contractor shall complete the past performance table provided as Past Performance.doc. This Microsoft Word 97™ document includes information from not more than five of their previous/current contracts that are most current and relevant to the labor categories and minimum and maximum quantities identified in Section B. The most relevant contracts will be those which most closely match the solicitation requirements in terms of scope (clinical environment, e.g., Nursing Services or Ancillary Services), magnitude (numbers of personnel provided by labor category), and complexity (range of labor categories provided under the contract). In order to be considered relevant, services must have been provided within the last five years. In selecting the most relevant contracts, the offeror may

include contracts that demonstrate the prior experience of corporate officials who will have a role in support of the requirements of the solicitation or the experience of subcontractors/teaming partners who will be used in support of the requirements of the solicitation.

b. If the offeror has no relevant past performance, they shall affirmatively state that they possess no relevant past performance within Past Performance.doc.

c. The offeror shall provide Past Performance information by completing the table contained within Past Performance.doc which includes the following:

- 1) The contract number(s).
- 2) A brief description of services provided and an explanation of how the experience is directly related and/or similar or relevant to the statement of work.
- 3) The number and type of health care workers provided, e.g., 2 medical laboratory technicians; 3 respiratory therapists.
- 4) The location of services provided including facility name, city and, state.
- 5) The dates of services provided.
- 6) The name, organization, address and telephone number of a verified point of contact at the federal, state, local government or commercial entity for which the contract services were performed. The offeror is responsible for ensuring that all points of contact provided as references are current and appropriate, and that the phone numbers provided are valid.
- 7) The number, type and severity of any quality, delivery or price problems in performing the contract, the corrective action taken and the effectiveness of the corrective action.

d. A single page discussion (which follows the chart) of noteworthy successes, accomplishments, awards or commendations achieved during the described experience in providing services, and any other information the offeror considers relevant to its corporate experience. The Government will accept no more than one single spaced page.

e. The Government will not restrict its past performance evaluation to information submitted by offerors but will also consider any other relevant information in its possession. The Government reserves the right to contact the points of contact identified in the offeror's proposal for the purpose of verifying the offeror's record of past performance.

L.7.1.3 Diskettes 3 and 4: Business Proposals

Your business proposal must include the following:

- a. A completed Standard Form 33. This form must be downloaded, printed, completed, signed and mailed/delivered by the offeror with diskettes 3 and 4.
- b. An acknowledgment of any amendments issued by the Government prior to the receipt of proposals.
- c. A Completed Section K.doc containing the Representations, Certifications and Other Statements of Offerors contained in Section K of this Solicitation.
- d. For the Minimum Order Quantity, the offeror shall complete Electronic Schedule B.xls for Lots 1 through 3. The offeror shall complete the boxes shaded in light blue. The spreadsheet will calculate the remaining totals including the total price for Lots 1 through 3. Included on Electronic Schedule B.xls is a Supplemental Pricing Worksheet for each separately priced position. The offeror shall also complete the Sources tab within that spreadsheet, supplying the information used for the basis for proposed compensation rates, benefits and, including all market surveys performed. The information provided in Electronic Schedule B.xls for Lots 1 through 3 will be used to determine price realism

during the evaluation of the offeror's proposal. The final negotiated health care worker compensation rates proposed within Electronic Schedule B.xls will be considered the lowest acceptable compensation rates to the health care worker upon award of initial task orders. The task order awardee is not prohibited from paying a range of compensation rates to recruited health care workers in a particular labor category, but under no circumstances shall the compensation rate be lower than that included in the rates shown in Electronic Schedule B.xls.

e. For Notional Task Order 00001 (USNS COMFORT Backfill Services for National Naval Medical Center, Bethesda, MD) the offeror shall complete NTO001.xls identified in the Notional Task Order. Included on NTO001.xls is a Supplemental Pricing Worksheet for each separately priced position. The offeror shall also complete the Sources tab within that spreadsheet, supplying the information used for the basis for proposed compensation rates, benefits and, including all market surveys performed. The information provided in NTO001.xls for each separately priced position will be used to determine price realism during the evaluation of the offeror's proposal.

f. For Notional Task Order 00002 (Health Educator services for the Naval Medical Clinic, Quantico, VA) the offeror shall complete NTO002.xls identified in the Notional Task Order. Included on NTO002.xls is a Supplemental Pricing Worksheet for each separately priced position. The offeror shall also complete the Sources tab within that spreadsheet, supplying the information used for the basis for proposed compensation rates, benefits and, including all market surveys performed. The information provided in NTO002.xls for each separately priced position will be used to determine price realism during the evaluation of the offeror's proposal.

g. Multiple awards are contemplated as a result of this solicitation. The minimum quantity per contract awarded will be at least one Lot. The Government shall determine which Lots are awarded to each successful offeror (via Task Order) at the time of award of the basic contract. Task Orders for the minimum quantities will be issued concurrent with the award of each contract. Task Orders issued after the minimum quantities are satisfied will be priced individually at the time of Task Order proposal request (see Section H.2. for Task Order procedures).

L.7.1.5 Diskettes 5 and 6: Management Plan

The contractor shall complete the document provided in Attachment XII as Management Plan.doc. This Microsoft Word 97™ document requires the offerors to provide information concerning their management plan for the provision of services.

L.8 PROPOSAL EVALUATION FACTORS

a. Proposals shall be in the form prescribed by, and shall contain a response to each of the areas identified in Section L, paragraph L.7 of this solicitation.

b. The Government reserves the right to award without discussions. It should be noted that award may be made to other than the lowest priced offer. Offerors are therefore cautioned that each initial offer should contain the offeror's best terms. In the evaluation of all offeror's proposals, Past Performance is significantly more important than the Management Plan. Additionally, the combined technical evaluation factors of Past Performance and Management Plan are significantly more important than the combined price evaluation factors of Completeness, Reasonableness, and Realism.

L.8.1 PAST PERFORMANCE

The Government will evaluate the, "risk to the Government" associated with the offeror's past performance. The Government will give greater consideration to experience that is most relevant to the solicitation. Past Performance not as relevant will warrant a greater technical risk assessment. The most relevant past performance will be those references that most closely match the solicitation requirements in terms of Scope (i.e. the type of health care workers in settings similar to the requirement [clinical environment]) and, Magnitude (i.e. the numbers of health care workers provided by labor category) and, Complexity (i.e. the range and depth of labor categories, geographic similarity to the requirement [i.e. metropolitan versus rural], single/multi-site and, single/multi specialty). The Government reserves the right to contact the points of contact identified in the offeror's proposal for the purpose of verifying the offeror's record of past performance. The Government will not restrict its past performance evaluation to information submitted by offerors but will also consider any other information in its possession.

L.8.2 BUSINESS PROPOSALS

Adequate price competition is expected for this acquisition. As indicated in Section L, paragraph 7.1.4 (above), offerors are required to furnish Supplemental Pricing Worksheets, to support all prices proposed for Section B, paragraph B.11 (Lots 1 through 3; the minimum order quantities) and prices proposed for the Notional Task Orders contained in Attachments VI and VII. The Price Proposal (containing both Section B minimum order quantity pricing and Attachment VII Notional Task Order pricing) will be evaluated with consideration to the following factors:

- (1) Completeness. All cost information required by the Request for Proposal (RFP) has been submitted.
- (2) Reasonableness. The degree to which the proposed prices compare to the prices a reasonable prudent person would expect to incur for the same or similar services.
- (3) Realism. The proposed labor compensation rates proposed in the offeror's supplemental pricing worksheets for each CLIN or SLIN will be examined to identify unusually low cost estimates, understatements of costs, inconsistent pricing patterns, potential misunderstandings of the solicitation requirements, and the risk of personnel recruitment and retention problems during contract performance.

L.8.3. MANAGEMENT PLAN

The Government will evaluate the "risk to the Government" associated with the offeror's Management Plan. The Government will evaluate the offeror's responses in regards to their approach to recruitment, retention, taking into account the specific requirements of task order contracting, Notional task orders 00001 and 00002 and all other requirements of the solicitation. The Government will not assume that the offeror possesses any capability unless it is specified in the proposal. Specific guidance for preparation of the Management Plan is at Attachment XII, Management Plan

L.9 TECHNICAL QUESTIONS

Offerors must submit all technical questions concerning this solicitation in writing to the Contract Specialist. Naval Medical Logistics Command (NMLC) must receive the questions no later than 15 calendar days after the issue date (Block 5 of SF 33) of this solicitation. NMLC will answer questions that may affect offers in an amendment to the solicitation. NMLC will not disclose the source of the questions. Questions shall be referred to:

NAVAL MEDICAL LOGISTICS COMMAND
ATTN: Code 02, Ms. Kathy E. Robinson
1681 NELSON STREET
FORT DETRICK, MD 21702-9203
FAX: (301) 619-6793

L.10 LIMITATION OF PAYMENT FOR PERSONAL SERVICES

Under the provisions of 10 U.S.C. 1091 and DODI 6025.5, "Personal Services Contracting", implemented 6 January 1995, the total amount of compensation paid to an individual direct health care provider in any year cannot exceed the full time equivalent annual rate specified in 10 U.S.C. 1091.

L.11 PRE-PROPOSAL CONFERENCE

The Government will conduct a pre-proposal conference for this acquisition. This conference will be conducted at the Naval Medical Clinic, (Class Room) Quantico, VA on 4 January 2001, 9:00 AM local time.

To register for this conference, send an email or FAX request to the point of contact provided below.

Naval Medical Logistics Command
ATTN: Code 02 Kathy E. Robinson

1681 Nelson Street
Fort Detrick, MD 21702-9203
FAX: (301) 619-6793
KERobinson @us.med.navy.mil

Provide the following information:

Name of Offeror
Address and Phone Number of Offeror
Name(s) of Attendees (Limit 3 per offeror)

L.12 SITE VISITS

The Government will conduct a site visit at the Naval Medical Clinic, (Class Room) Quantico, VA on 4 January 2001, immediately following the pre-proposal conference outlined in L.10 above.

To register for the site visit, send an email or FAX request to the point of contact provided below.

Naval Medical Logistics Command
ATTN: Code 02 Kathy E. Robinson
1681 Nelson Street
Fort Detrick, MD 21702-9203
FAX: (301) 619-6793
KERobinson@us.med.navy.mil

Provide the following information:

Name of Offeror
Address and Phone Number of Offeror
Name(s) of Attendees (Limit 3)

L.13 REVIEW OF AGENCY PROTESTS

(a) The contracting activity, Naval Medical Logistics Command will process agency protests in accordance with the requirements set forth in FAR 33.101(d).

(b) Pursuant to FAR 33.101(d)(4), agency protests may be filed directly with the appropriate reviewing authority; or, a protester may appeal a decision rendered by a contracting officer to the reviewing authority.

(c) The reviewing authority for Mrs. Shirley Overcash is the Mr. Gilbert Hovermale, Naval Medical Logistics Command, Code 02, 1681 Nelson Street, Fort Detrick, MD 21702. Agency procurement protests should clearly identify the initial adjudicating official, i.e., the "contracting officer" or "reviewing official".

(d) Offerors should note this review of the Contracting Officer's decision will not extend GAO's timeliness requirements. Therefore, any subsequent protest to GAO must be filed within 10 days of knowledge of initial adverse agency action."

(END OF SECTION L)

SECTION M
EVALUATION FACTORS FOR AWARD

M.1. EVALUATION CRITERIA AND BASIS FOR AWARD

a. The Government will make award(s) to those responsible offerors submitting proposals that are determined most advantageous to the Government, price and other factors considered. The evaluation of proposals will be based on a technical evaluation of Past Performance and the Management Plan and, the Business Proposal submitted by each offeror. The Government intends to make three awards under this solicitation to allow for maximum competition for future task order awards. Awards under this procurement will be made to the offerors determined to be the best value to the Government.

b. The combined factors Past Performance and Management Plan are significantly more important than price. In the evaluation of all offeror's proposal, Past Performance is significantly more important than the Management Plan. Additionally, the combined technical evaluation factors of Past Performance and Management Plan are significantly more important than the combined price evaluation factors of Completeness, Reasonableness, and Realism. However, the closer the merits of the technical proposal are to one another, the greater will be the importance of price in making the award determination. In the event that two or more proposals are determined not to have any substantial technical differences (i.e. are technically equivalent), award may be made to the lower priced proposal. It should be noted that award may be made to other than the lowest priced offer if the Government determines that a price premium is warranted due to technical merit. A price premium may also be considered to facilitate award of contracts to three different offerors to gain the advantages associated with increased competition for future task orders.

c. Awards may also be made on the basis of initial offers without discussions. Offerors are therefore cautioned that each initial offer should contain the offeror's best terms.

d. Past Performance. The Government will evaluate the, "risk to the Government" associated with the offeror's past performance. The Government will give greater consideration to experience that is most relevant to the solicitation. Past Performance not as relevant will warrant a greater technical risk assessment. The most relevant past performance will be those references that most closely match the solicitation requirements in terms of Scope (i.e. the type of health care workers in settings similar to the requirement [clinical environment]) and, Magnitude (i.e. the numbers of health care workers provided by labor category) and, Complexity (i.e. the range and depth of labor categories, geographic similarity to the requirement [i.e. metropolitan versus rural], single/multi-site and, single/multi specialty). The Government reserves the right to contact the points of contact identified in the offeror's proposal for the purpose of verifying the offeror's record of past performance. The Government will not restrict its past performance evaluation to information submitted by offerors but will also consider any other information in its possession.

e. Business Proposals. The Government will evaluate the business proposal responses with consideration to the following factors:

- (1) Completeness. All cost information required by the Request for Proposal (RFP) has been submitted.
- (2) Reasonableness. The degree to which the proposed prices compare to the prices a reasonable prudent person would expect to incur for the same or similar services.
- (3) Realism. The proposed labor compensation rates proposed in the offeror's supplemental pricing worksheets for each CLIN or SLIN will be examined to identify unusually low cost estimates, understatements of costs, inconsistent pricing patterns, potential misunderstandings of the solicitation requirements, and the risk of personnel recruitment and retention problems during contract performance.

f. Management Plan. The Government will evaluate the "risk to the Government" associated with the offeror's Management Plan. The Government will evaluate the offeror's responses in regards to their approach to recruitment, retention, taking into account the specific requirements of task order contracting, Notional task orders 001 and 002 and all other requirements of the solicitation.

(END OF SECTION M)

**ATTACHMENT I- POSITION SPECIFIC STATEMENT OF WORK AND
PERSONAL QUALIFICATIONS SHEETS FOR LOT 1**

ATTACHMENT I

1. Site of Service. The contractor shall provide personnel for service in the Primary Care Clinic at the Naval Medical Clinic, Quantico, Virginia.

2. Labor categories. The contractor shall provide personnel from the following labor categories:

Family Nurse Practitioner (FNP)
Registered Nurse (RN)

3. Qualifications and Leave.

a. All personnel shall meet not less than the minimum requirements given in Section C.6.

b. The labor categories listed in paragraph 2 above shall accrue 10 hours of paid leave, combined annual (vacation) and sick leave, at the end of every 2-week period worked. Your services shall not be required on the following federally established paid holidays: New Year's Day, Martin Luther King's Birthday, Memorial Day, Independence Day, Labor Day, Veteran's Day, Thanksgiving Day, and Christmas Day. You shall be compensated by the Government for these periods of planned absences.

4. Hours of operation. The Primary Care Clinic operates from 0730 to 2000 hours, Monday through Friday, and 0730-1200, Saturday, Sunday and Holidays.

5. Staffing and scheduling.

a. The contractor shall provide two individual full-time Family Nurse Practitioners, and two individual full-time Registered Nurses. In order to maintain continuity of care for patients enrolled to the Naval Medical Clinic, Quantico, the contractor healthcare practitioners **MUST BE FULL-TIME INDIVIDUALS**. The Commanding Officer will not privilege more than one individual for each of the required positions.

b. The contractor Family Nurse Practitioners shall supplement the active duty Navy physician staff (including Department Head) assigned to the Primary Care Clinic. The active duty Navy Department Head or Senior Medical Officer will provide supervision of all activities within the clinic. The Department Head will schedule all Family Nurse Practitioners to ensure adequate coverage of all clinic operating hours. In no instance will an individual contractor healthcare worker be required to provide services (on-site service plus approved leave) in excess of 80 hours per 2-week period. The specific schedule for each healthcare worker for each 2-week period will be scheduled 2 months in advance by the Department Head. Each healthcare worker will accrue leave and be subject to approval in accordance with Section C. The contractor need not provide back-up coverage for contractor healthcare practitioners during periods of approved leave.

c. The Clinic Manager will provide supervision for the Registered Nurse. The Department Head will schedule all Registered Nurses to ensure adequate coverage of all clinic operating hours. In no instance will an individual contractor healthcare worker be required to provide services (on-site service plus approved leave) in excess of 80 hours per 2-week period. The specific schedule for each healthcare worker for each 2-week period will be scheduled 1 month in advance by the Department Head. Each healthcare worker will accrue leave and be subject to approval in accordance with Section C. The contractor need not provide back-up coverage for contractor healthcare practitioners during periods of approved leave.

6. Duties.

a. As assigned, each healthcare worker shall perform the duties given in Section C.7 of the basic contract.

b. The Commanding Officer will enroll to the contractor Family Nurse Practitioners between 800 and 1500 TRICARE Prime enrollees.

PERSONAL QUALIFICATIONS SHEET – NURSE PRACTITIONER

1. Every item on the Personal Qualifications Sheet must be addressed. Please sign and date where indicated. Any additional information required may be provided on a separate sheet of paper (indicate by number and section the question(s) to be addressed).
2. The information you provide will be used to determine your acceptability based on Section C of the solicitation. In addition to the Personal Qualifications Sheet, please submit three letters of recommendation as described in Item VIII. of this Sheet.
3. After contract award, all of the information you provide will be verified during the credentialing process. At that time, you will be required to provide the following documentation verifying your qualifications: Professional Education Degree, Release of Information, Personal and Professional Information Sheet, all medical licenses held within the preceding 10 years, continuing education certificates, and employment eligibility documentation. If you submit false information, the following actions may occur:
 - a. Your contract may be terminated for default. This action may initiate the suspension and debarment process, which could result in the determination that you are no longer eligible for future Government contracts.
 - b. You may lose your clinical privileges. If that occurs, an adverse credentialing action report will be forwarded to your State licensing bureau and the National Practitioners Databank.
4. Unless otherwise specified, the Government reserves the right to transfer to the gaining Contractor the credentials of a health care worker who has been granted delineated clinical privileges on a predecessor contract without a new or additional credentialing action. This extension may only occur:
 - a. within the same command,
 - b. when there is no increased clinical competency requirement of the health care worker,
 - c. when there is no significant change in the scope of clinical practice of the health care worker,
 - d. when there is no gap in performance between the contracts and,
 - e. when the health care worker has had acceptable performance evaluations.
5. Health Certification. Individuals providing services under Government contracts are required to undergo a physical exam 60 days prior to beginning work. The exam is not required prior to award but is required prior to the performance of services under contract. By signing this form, you have acknowledged this requirement.

6. Practice Information:

- | | No | Yes |
|---|-------|-------|
| a. Have you ever been the subject of a malpractice claim? (indicate final disposition of case in comments) | _____ | _____ |
| b. Have you ever been a defendant in a felony or misdemeanor case? (indicate final disposition of case in comments) | _____ | _____ |
| c. Has your license to practice or DEA certification ever been revoked or restricted in any state? | _____ | _____ |

If any of the above is answered "yes" attach a detailed explanation. Specifically address the disposition of the claim or charges for numbers 1 and 2 above, and the State of the revocation for number 3 above.

PRIVACY ACT STATEMENT

Under 5 U.S.C. 552a and Executive Order 9397, the information provided on these pages and the Personal Qualifications Sheet is requested for use in the consideration of a contract; disclosure of the information is voluntary; failure to provide information may result in the denial of the opportunity to enter into a contract.

Signature

Date (mm/dd/yy)

I. General Information

Name: _____ SSN: _____
Last, First Middle

Date of Birth: _____

Address: _____

Phone: (____) _____

II. Professional Education

A. Professional School:

Date of Training
(From) (To)

1. Name of ANA Accredited School: _____

2. Type and Date of Degree: _____

3. Address of School: _____

III. Professional Licensure

State Date of Expiration (mm/dd/yy)

IV. Professional Certification:

ANCC or AANP: _____
Date of Expiration (mm/dd/yy)

V. Professional Employment: List your current and preceding employers. Provide dates as month/year.

Name and Address of Present Employer From To

(1) _____

Work Performed: _____

Name and Address of Previous Employer From To

(2) _____

Work Performed: _____

(3) _____

Work Performed: _____

Are you currently employed on a Navy contract? _____
If so where is your current contract and what is the position? _____
When does the contract expire? _____

VI. Continuing Education:

Title of Course	From	To	CE Hours

VII. Employment Eligibility: Yes No

Do you meet the requirements for U.S. Employment Eligibility contained in Section VIII? _____

VIII. Professional References

Provide letters of recommendation from three practicing physicians attesting to your clinical skills. Reference letters must include name, title, phone number, date of reference, address and signature of the individual providing reference. Letters of reference must have been written within the preceding 5 years.

IX. Additional Information

Provide any additional information you feel may enhance your ranking such as your resume, curriculum vitae, recommendations or documentation of any awards you may have received, etc.

X. I hereby certify the above information to be true and accurate:

Signature Date (mm/dd/yy)

PERSONAL QUALIFICATIONS SHEET – REGISTERED NURSE

1. Every item on the Personal Qualifications Sheet must be addressed. Please sign and date where indicated. Any additional information required may be provided on a separate sheet of paper (indicate by number and section the question(s) to be addressed).
2. The information you provide will be used to determine your acceptability based on Section D of the solicitation. In addition to the Personal Qualifications Sheet, please submit three letters of recommendation as described in Item VIII. of this Sheet.
3. After contract award, all of the information you provide will be verified during the credentialing process. At that time, you will be required to provide the following documentation verifying your qualifications: Professional Education Degree, Release of Information, Personal and Professional Information Sheet, all medical licenses held within the preceding 10 years, continuing education certificates, and employment eligibility documentation. If you submit false information, the following actions may occur:
 - a. Your contract may be terminated for default. This action may initiate the suspension and debarment process, which could result in the determination that you are no longer eligible for future Government contracts.
 - b. You may lose your clinical privileges. If that occurs, an adverse credentialing action report will be forwarded to your State licensing bureau and the National Practitioners Databank.
4. Unless otherwise specified, the Government reserves the right to transfer to the gaining Contractor the credentials of a health care worker who has been granted delineated clinical privileges on a predecessor contract without a new or additional credentialing action. This extension may only occur:
 - a. within the same command,
 - b. when there is no increased clinical competency requirement of the health care worker,
 - c. when there is no significant change in the scope of clinical practice of the health care worker,
 - d. when there is no gap in performance between the contracts and,
 - e. when the health care worker has had acceptable performance evaluations.
5. Health Certification. Individuals providing services under Government contracts are required to undergo a physical exam 60 days prior to beginning work. The exam is not required prior to award but is required prior to the performance of services under contract. By signing this form, you have acknowledged this requirement.

6. Practice Information:

- | | Yes | No |
|---|-------|-------|
| a. Have you ever been the subject of a malpractice claim? (indicate final disposition of case in comments) | _____ | _____ |
| b. Have you ever been a defendant in a felony or misdemeanor case? (indicate final disposition of case in comments) | _____ | _____ |
| c. Has your license to practice or DEA certification ever been revoked or restricted in any state? | _____ | _____ |

If any of the above is answered "yes" attach a detailed explanation. Specifically address the disposition of the claim or charges for numbers 1 and 2 above, and the State of the revocation for number 3 above.

PRIVACY ACT STATEMENT

Under 5 U.S.C. 552a and Executive Order 9397, the information provided on these pages and the Personal Qualifications Sheet is requested for use in the consideration of a contract; disclosure of the information is voluntary; failure to provide information may result in the denial of the opportunity to enter into a contract.

Signature Date (mm/dd/yy)

I. General Information

Name: _____ SSN: _____
 Last, First Middle

Date of Birth: _____

Address: _____

Phone: (____) _____

II. Professional Education

A. Nursing School:

Date of Training

1. Name of Accredited School: _____

2. Type of Degree: _____

3. Address of School: _____

III. Professional Licensure (License must be current, valid, and unrestricted):

_____ (State) Date of Expiration: _____ (mm/dd/yy)

IV. Medical Certification: This should include BLS, etc.

Type of Certification and Date of Certification or Expiration: _____

V. Professional Employment: List your current and preceding employers. Provide dates as month/year.

Name and Address of Present Employer From To

(1) _____

Work Performed: _____

Name and Address of Previous Employer

From To

(2) _____

Work Performed: _____

(3) _____

Work Performed: _____

Are you are currently employed on a Navy contract? _____

If so where is your current contract and what is the position? _____

When does the contract expire? _____

VI. Continuing Education:

Title of Course	From	To	CE Hours
-----------------	------	----	----------

VII. Employment Eligibility: Yes No

Do you meet the requirements for U.S. Employment Eligibility contained in Section VII? _____

VIII. Professional References

Provide letters of recommendation from three practicing physicians attesting to your clinical skills. Reference letters must include name, title, phone number, date of reference, address and signature of the individual providing reference. Letters of reference must have been written within the preceding 5 years.

IX. Additional Information

Provide any additional information you feel may enhance your ranking such as your resume, curriculum vitae, commendations or documentation of any awards you may have received, etc.

X. I hereby certify the above information to be true and accurate:

Signature

Date (mm/dd/yy)

**ATTACHMENT II POSITION SPECIFIC STATEMENT OF WORK AND
PERSONAL QUALIFICATIONS SHEETS FOR LOT II**

ATTACHMENT II

1. Site of Service. The contractor shall provide personnel for service in the Primary Care Clinic and the Psychiatry Clinic at the Naval Medical Clinic, Quantico, Virginia.

2. Labor categories. The contractor shall provide personnel from the following labor categories:

Licensed Practical Nurse (LPN)
Medical Assistant (MA)
Psychiatric Technician

3. Qualifications.

a. All personnel shall meet not less than the minimum requirements given in Section C.6.

b. For the LPNs and MAs listed in paragraph 2 above, all leave benefits will be provided by the Contractor. Your services shall not be required on the following federally established paid holidays: New Year's Day, Martin Luther King's Birthday, Memorial Day, Independence Day, Labor Day, Veteran's Day, Thanksgiving Day, and Christmas Day. You shall be compensated by the Government for these periods of planned absences.

c. For the Psychiatric Technician listed in paragraph 2 above, the health care worker shall accrue 8 hours of paid leave, combined annual (vacation) and sick leave, at the end of every 2-week period worked. Your services shall not be required on the following federally established paid holidays: New Year's Day, Martin Luther King's Birthday, President's Day, Memorial Day, Independence Day, Labor Day, Columbus Day, Veteran's Day, Thanksgiving Day, and Christmas Day. You shall be compensated by the Government for these periods of planned absences.

4. Hours of operation.

a. The Primary Care Clinic operates from 0730 to 2000 hours, Monday through Friday, and 0730-1200, Saturday, Sunday and Holidays.

b. The Psychiatry Clinic operates from 0715 to 1615 hours, Monday through Friday.

5. Staffing and scheduling.

a. For Licensed Practical Nurses and the Medical Assistants, the contractor shall provide sufficient personnel to cover the schedule in the following table. All healthcare workers under this Task Order will not accrue leave under the task order and will be subject to replacement coverage by the contractor in accordance with paragraphs C.3 and C.3.2 (and its subparagraphs) of the basic contract. The contractor is responsible for providing the leave benefit for these personnel and for approving leave for these personnel. The contractor shall maintain sufficient back-up personnel to ensure coverage of the schedule during periods of both scheduled and unscheduled absences. The contractor is responsible for preparing all schedules.

TIME PERIOD	MON	TUES	WED	THURS	FRI	SAT	SUN/HOL
0730-1200	5 LPN 4 MA	5 LPN 4 MA	5 LPN 4 MA	5 LPN 4 MA	5 LPN 4 MA	1 LPN 1 MA	1 LPN 1 MA
1200-1600	5 LPN 4 MA	5 LPN 4 MA	5 LPN 4 MA	5 LPN 4 MA	5 LPN 4 MA		
1600-2000	1 LPN 1 MA	1 LPN 1 MA	1 LPN 1 MA	1 LPN 1 MA	1 LPN 1 MA		

b. For the Psychiatric Technician, services shall be required between the hours of 0715 and 1615. Services shall be provided for an 8.5 hour period (to include an uncompensated 30 minute lunch), Monday through Friday. Services will not be normally required on the day of observance of Federal holidays; if services are required on the day of observance of a Federal holiday, the healthcare worker will be granted compensatory time on another day

during that pay period for the holiday. Specific hours shall be scheduled one month in advance by the Commanding Officer. Any changes in the schedule shall be coordinated between the Contractor and the Government.

- c. The Charge Nurse in the Primary Care Clinic will supervise the contractor LPNs and the MAs.
- d. The Charge Nurse in the Psychiatry Clinic will supervise the contractor Psychiatric Clinic.

PERSONAL QUALIFICATIONS SHEET – LICENSED PRACTICAL/VOCATIONAL NURSE

1. Every item on the Personal Qualifications Sheet must be addressed. Please sign and date where indicated. Any additional information required may be provided on a separate sheet of paper (indicate by number and section the question(s) to be addressed).
2. The information you provide will be used to determine your acceptability based on Section C of the solicitation. In addition to the Personal Qualifications Sheet, please submit three letters of recommendation as described in Item VIII. of this Sheet.
3. After contract award, all of the information you provide will be verified during the credentialing process. At that time, you will be required to provide the following documentation verifying your qualifications: Professional Education Degree, Release of Information, Personal and Professional Information Sheet, all medical licenses held within the preceding 10 years, continuing education certificates, and employment eligibility documentation. If you submit false information, the following actions may occur:
 - a. Your contract may be terminated for default. This action may initiate the suspension and debarment process, which could result in the determination that you are no longer eligible for future Government contracts.
 - b. You may lose your clinical privileges. If that occurs, an adverse credentialing action report will be forwarded to your State licensing bureau and the National Practitioners Databank.
4. Unless otherwise specified, the Government reserves the right to transfer to the gaining Contractor the credentials of a health care worker who has been granted delineated clinical privileges on a predecessor contract without a new or additional credentialing action. This extension may only occur:
 - a. within the same command,
 - b. when there is no increased clinical competency requirement of the health care worker,
 - c. when there is no significant change in the scope of clinical practice of the health care worker,
 - d. when there is no gap in performance between the contracts and,
 - e. when the health care worker has had acceptable performance evaluations.
5. Health Certification. Individuals providing services under Government contracts are required to undergo a physical exam 60 days prior to beginning work. The exam is not required prior to award but is required prior to the performance of services under contract. By signing this form, you have acknowledged this requirement.

6. Practice Information:

Yes No

a. Have you ever been the subject of a malpractice claim? (indicate final disposition of case in comments)

b. Have you ever been a defendant in a felony or misdemeanor case? (indicate final disposition of case in comments)

c. Has your license to practice or DEA certification ever been revoked or restricted in any state?

If any of the above is answered "yes" attach a detailed explanation. Specifically address the disposition of the claim or charges for numbers 1 and 2 above, and the State of the revocation for number 3 above.

PRIVACY ACT STATEMENT

Under 5 U.S.C. 552a and Executive Order 9397, the information provided on these pages and the Personal Qualifications Sheet is requested for use in the consideration of a contract; disclosure of the information is voluntary; failure to provide information may result in the denial of the opportunity to enter into a contract.

Signature

Date (mm/dd/yy)

I. General Information

Name: _____ SSN: _____
Last, First Middle

Date of Birth: _____

Address: _____

Phone: (____) _____

II. Professional Education

A. Professional School:

Date of Training
(From) (To)

1. Name of School: _____

2. Type and Date of Degree: _____

3. Address of School: _____

III. Professional Licensure

_____ State _____ Date of Expiration (mm/dd/yy)

IV. Professional Employment: List your current and preceding employers. Provide dates as month/year.

Name and Address of Present Employer From To

(1) _____

Work Performed: _____

Name and Address of Previous Employer From To

(2) _____

Work Performed: _____

(3) _____

Work Performed: _____

Are you are currently employed on a Navy contract? _____

If so where is your current contract and what is the position? _____

When does the contract expire? _____

V. Continuing Education:

Title of Course	From	To	CE Hours

VI. Certification, Degrees, or Licensure: This should include BLS, NRP, ACLS, etc.

Type of Certification, Degree or License and Date of Certification or Expiration: _____

VII. Employment Eligibility: Yes No

Do you meet the requirements for U.S. Employment Eligibility contained in Section VII? _____

VIII. Professional References

Provide letters of recommendation from three practicing physicians attesting to your clinical skills. Reference letters must include name, title, phone number, date of reference, address and signature of the individual providing reference. Letters of reference must have been written within the preceding 5 years.

IX. Additional Information

Provide any additional information you feel may enhance your ranking such as your resume, curriculum vitae, commendations or documentation of any awards you may have received, etc.

X. I hereby certify the above information to be true and accurate:

Signature

Date (mm/dd/yy)

PERSONAL QUALIFICATIONS SHEET – MEDICAL ASSISTANT

1. Every item on the Personal Qualifications Sheet must be addressed. Please sign and date where indicated. Any additional information required may be provided on a separate sheet of paper (indicate by number and section the question(s) to be addressed).
2. The information you provide will be used to determine your acceptability based on Section C of the solicitation. In addition to the Personal Qualifications Sheet, please submit three letters of recommendation as described in Item VIII. of this Sheet.
3. After contract award, all of the information you provide will be verified during the credentialing process. At that time, you will be required to provide the following documentation verifying your qualifications: Professional Education Degree, Release of Information, Personal and Professional Information Sheet, all medical licenses held within the preceding 10 years, continuing education certificates, and employment eligibility documentation. If you submit false information, the following actions may occur:
 - a. Your contract may be terminated for default. This action may initiate the suspension and debarment process, which could result in the determination that you are no longer eligible for future Government contracts.
 - b. You may lose your clinical privileges. If that occurs, an adverse credentialing action report will be forwarded to your State licensing bureau and the National Practitioners Databank.
4. Unless otherwise specified, the Government reserves the right to transfer to the gaining Contractor the credentials of a health care worker who has been granted delineated clinical privileges on a predecessor contract without a new or additional credentialing action. This extension may only occur:
 - a. within the same command,
 - b. when there is no increased clinical competency requirement of the health care worker,
 - c. when there is no significant change in the scope of clinical practice of the health care worker,
 - d. when there is no gap in performance between the contracts and,
 - e. when the health care worker has had acceptable performance evaluations.
5. Health Certification. Individuals providing services under Government contracts are required to undergo a physical exam 60 days prior to beginning work. The exam is not required prior to award but is required prior to the performance of services under contract. By signing this form, you have acknowledged this requirement.

6. Practice Information:

Yes No

a. Have you ever been the subject of a malpractice claim? (indicate final disposition of case in comments)

b. Have you ever been a defendant in a felony or misdemeanor case? (indicate final disposition of case in comments)

c. Has your license to practice or DEA certification ever been revoked or restricted in any state?

If any of the above is answered "yes" attach a detailed explanation. Specifically address the disposition of the claim or charges for numbers 1 and 2 above, and the State of the revocation for number 3 above.

PRIVACY ACT STATEMENT

Under 5 U.S.C. 552a and Executive Order 9397, the information provided on these pages and the Personal Qualifications Sheet is requested for use in the consideration of a contract; disclosure of the information is voluntary; failure to provide information may result in the denial of the opportunity to enter into a contract.

Signature

Date (mm/dd/yy)

I. General Information

Name: _____ SSN: _____
Last, First Middle

Date of Birth: _____

Address: _____

Phone: (____) _____

II. Professional Education: You must meet **one** of the following 4 categories of training and/or experience:

A. Certificate or Degree as a Medical Assistant:

Date of Training
(From) (To)

1. Name of School:

2. Type and Date of Degree: _____

3. Address of School:

B. Experience as a Medical Assistant of at least 12 months within the preceding 36 months. Provide experience dates in Item IV, Professional Employment

C. Current licensure as an LPN/LVN and experience as an LPN/LVN or MA of at least 12 months within the preceding 36 months.

License Number: _____

State: _____

Expiration Date: _____

Provide experience dates in Item III, Professional Employment

D. Certification as a hospital corpsman and experience as a military medical technician/hospital corpsman/medic or MA of at least 12 months within the preceding 36 months.

State place where you received training: _____

Dates of training: _____

Provide experience dates in Item III, Professional Employment

III. Professional Employment: List your current and preceding employers. Provide dates as month/year.

Name and Address of Present Employer

From To

(1) _____

Work Performed: _____

Name and Address of Previous Employer

From To

(2) _____

Work Performed: _____

(3) _____

Work Performed: _____

Are you currently employed on a Navy contract? _____

If so where is your current contract and what is the position? _____

When does the contract expire? _____

IV. Certification, Degrees, or Licensure: This should include BLS, NRP, ACLS, etc.

Type of Certification, Degree or License and Date of Certification or Expiration: _____

V. Employment Eligibility: Yes No

Do you meet the requirements for U.S. Employment Eligibility contained in Section VII? _____

VI. Professional References

Provide letters of recommendation from three practicing physicians attesting to your clinical skills. Reference letters must include name, title, phone number, date of reference, address and signature of the individual providing reference. Letters of reference must have been written within the preceding 5 years.

VII. Additional Information

Provide any additional information you feel may enhance your ranking such as your resume, curriculum vitae, commendations or documentation of any awards you may have received, etc.

VIII. I hereby certify the above information to be true and accurate:

Signature

Date (mm/dd/yy)

PERSONAL QUALIFICATIONS SHEET – PSYCHIATRIC TECHNICIAN

1. Every item on the Personal Qualifications Sheet must be addressed. Please sign and date where indicated. Any additional information required may be provided on a separate sheet of paper (indicate by number and section the question(s) to be addressed).
2. The information you provide will be used to determine your acceptability based on Section C of the solicitation. In addition to the Personal Qualifications Sheet, please submit three letters of recommendation as described in Item VIII. of this Sheet.
3. After contract award, all of the information you provide will be verified during the credentialing process. At that time, you will be required to provide the following documentation verifying your qualifications: Professional Education Degree, Release of Information, Personal and Professional Information Sheet, all medical licenses held within the preceding 10 years, continuing education certificates, and employment eligibility documentation. If you submit false information, the following actions may occur:
 - a. Your contract may be terminated for default. This action may initiate the suspension and debarment process, which could result in the determination that you are no longer eligible for future Government contracts.
 - b. You may lose your clinical privileges. If that occurs, an adverse credentialing action report will be forwarded to your State licensing bureau and the National Practitioners Databank.
4. Unless otherwise specified, the Government reserves the right to transfer to the gaining Contractor the credentials of a health care worker who has been granted delineated clinical privileges on a predecessor contract without a new or additional credentialing action. This extension may only occur:
 - a. within the same command,
 - b. when there is no increased clinical competency requirement of the health care worker,
 - c. when there is no significant change in the scope of clinical practice of the health care worker,
 - d. when there is no gap in performance between the contracts and,
 - e. when the health care worker has had acceptable performance evaluations.
5. Health Certification. Individuals providing services under Government contracts are required to undergo a physical exam 60 days prior to beginning work. The exam is not required prior to award but is required prior to the performance of services under contract. By signing this form, you have acknowledged this requirement.

6. Practice Information:

Yes No

a. Have you ever been the subject of a malpractice claim? (indicate final disposition of case in comments)

b. Have you ever been a defendant in a felony or misdemeanor case? (indicate final disposition of case in comments)

c. Has your license to practice or DEA certification ever been revoked or restricted in any state?

If any of the above is answered "yes" attach a detailed explanation. Specifically address the disposition of the claim or charges for numbers 1 and 2 above, and the State of the revocation for number 3 above.

PRIVACY ACT STATEMENT

Under 5 U.S.C. 552a and Executive Order 9397, the information provided on these pages and the Personal Qualifications Sheet is requested for use in the consideration of a contract; disclosure of the information is voluntary; failure to provide information may result in the denial of the opportunity to enter into a contract.

Signature

Date (mm/dd/yy)

I. General Information

Name: _____ SSN: _____
Last, First Middle

Date of Birth: _____

Address: _____

Phone: (____) _____

II. Professional Certification/Training/Education:

A. Current certification as a Psychiatric Technician by the American Association of Psychiatric Technicians:

(Name, address and date where training was received)

– OR –

B. Professional School (where LPN/LVN Degree was received)

Date of Training
(From) (To)

1. Name of School:

2. Type and Date of Degree: _____

3. Address of School:

4. Professional Licensure:

_____ State _____ Date of Expiration (mm/dd/yy)

– OR –

C. Psychiatric Technician state licensure or certification:

_____ State _____ Date of Expiration (mm/dd/yy)

III. Certification, Degrees, or Licensure: This should include BLS, NRP, ACLS, etc.

Type of Certification, Degree or License and Date of Certification or Expiration: _____

IV. Professional Employment: List your current and preceding employers. Provide dates as month/year.

Name and Address of Present Employer

From To

(1) _____

Work Performed: _____

Name and Address of Previous Employer

From To

(2) _____

Work Performed: _____

(3) _____

Work Performed: _____

Are you are currently employed on a Navy contract? _____

If so where is your current contract and what is the position? _____

When does the contract expire? _____

V. Continuing Education:

Title of Course

From

To

CE Hours

VI. Employment Eligibility:

Yes

No

Do you meet the requirements for U.S. Employment Eligibility contained in Section VII? _____

VII. Professional References

Provide letters of recommendation from three practicing physicians attesting to your clinical skills. Reference letters must include name, title, phone number, date of reference, address and signature of the individual providing reference. Letters of reference must have been written within the preceding 5 years.

VIII. Additional Information

Provide any additional information you feel may enhance your ranking such as your resume, curriculum vitae, commendations or documentation of any awards you may have received, etc.

IX. I hereby certify the above information to be true and accurate:

Signature

Date (mm/dd/yy)

**ATTACHMENT III - POSITION SPECIFIC STATEMENT OF WORK AND
PERSONAL QUALIFICATIONS SHEETS FOR LOT III**

ATTACHMENT III

1. Site of Service. The contractor shall provide personnel for services in the OB/GYN outpatient clinic at the National Naval Medical Center, Bethesda.

2. Labor categories. The contractor shall provide the following labor categories:

Nurse Practitioner, Women's Health
Licensed Practical Nurses (LPNs)

3. Qualifications.

a. All personnel shall meet not less than the minimum requirements given in Section C.6.

b. In addition to the qualifications stated in Section C for a Nurse Practitioner, Women's Health, the health care worker must possess a minimum of 2 years outpatient OB/GYN experience within the last 3 years.

4. Hours of operation. The OB/GYN outpatient clinic operates Monday through Friday, excluding federal holidays, from 0730-1600. Services shall normally be provided for an 8.5 hours period (to include an uncompensated 30 minute lunch). Services will not be normally required on the day of observance of Federal holidays; if services are required on the day of observance of a Federal holiday, the healthcare worker will be granted compensatory time on another day during that pay period for the holiday. Specific hours shall be scheduled one month in advance by the Commander. Any changes in the schedule shall be coordinated between the contractor and the Government.

5. Staffing and scheduling.

a. Nurse Practitioner, Women's Health:

(1) The contractor shall provide one individual Nurse Practitioner, Women's Health. In order to maintain continuity of services, the contractor Nurse Practitioner, Women's Health, **MUST BE A FULL-TIME INDIVIDUAL**. The Commander will not approve more than one individual for the required position.

(2) The Outpatient Department Head in the OB/GYN clinic will supervise the contractor Nurse Practitioner, Women's Health, required by this task order.

(3) Reference Section C.3.1, the Nurse Practitioner, Women's Health will accrue 8 hours of personal leave at the end of every 2-week period worked. All leave requests will be subject to the approval of the Outpatient Department Head.

b. Licensed Practical Nurses (LPNs):

(1) The contractor shall provide four individual Licensed Practical Nurses. In order to maintain continuity of services, the contractor LPN **MUST BE A FULL-TIME INDIVIDUAL**. The Commander will not approve more than one individual for the required positions.

(2) The Charge Nurse in the OB/GYN clinic will supervise the contractor LPNs required by this task order.

(3) Reference Section C.3.1, the LPNs will accrue 8 hours of personal leave at the end of every 2-week period worked. All leave requests will be subject to the approval of the Charge Nurse.

6. Duties.

a. Nurse Practitioner, Women's Health. In addition to the duties stated in Section C, the health care worker shall perform the following duties:

(1) The health care worker shall perform a full range of OB/GYN Nurse Practitioner services, within the scope of the clinical privileges granted by the Commanding Officer, on site using government furnished facilities, equipment and supplies. Workload occurs as a result of scheduled and unscheduled requirements for care.

(2) Routine workload is scheduled by the treatment facility. Primary workload is a result of appointments scheduled through the clinic appointment system and walk-in patients. Secondary workload is the result of consultation requests submitted to the specialty clinic by other government staff physicians/providers within the practitioners scope of practice. The health care worker is responsible for a full range of diagnostic examinations, the development of comprehensive treatment plans when indicated, delivery of treatment within the personnel and equipment capabilities of the treatment facility, provision of mandated medical surveillance and preventive services, and the quality and timeliness of treatment records and reports required to document procedures performed and care provided. The health care worker shall refer patients to staff specialists for consultation opinions and continuation of care and shall see the patients of other government staff health care providers who have been referred for consultation and treatment within their specialized scope of care and memorandum of understanding with their physician supervisor.

(3) The health care worker shall direct and supervise the performance of supporting government employees (i.e. hospital corpsmen, RNs, LVNs, students) assigned to him/her during the performance of clinical duties. Such direction and interaction will comply with government and professional clinical standards and accepted protocols. The health care worker will be subject to guidelines set forth in the Command's Process Evaluation and risk management instructions. The health care worker performs limited administrative duties which include maintaining statistical records of his/her clinical workload, participating in education programs, and participating in clinical staff's process evaluation and improvement functions at the prerogative of the Commanding Officer.

(4) Take, evaluate and record histories with specific emphasis on Obstetrics and Gynecology. Document using problem oriented method.

(5) Perform physical examinations with special emphasis on reproductive system. Physical examination shall include but is not limited to evaluation of thyroid, breasts, abdomen and pelvic exam.

(6) Order and interpret appropriate laboratory studies, X-rays, electrocardiograms and other special examinations.

(7) Collect specimens for pathologic examinations to include pap smears.

(8) Analyze and interpret data, formulate problem lists, and establish plans for solution of clinical problems.

(9) Evaluate new obstetrical patients as required.

(10) Evaluate routine prenatal follow-up patients

(11) Evaluate postpartum patients.

(12) Conduct orientation classes for entry level patients within the practitioners scope of practice and as directed by physician supervisor.

(13) Perform routine yearly asymptomatic gynecological health maintenance examinations.

(14) Assist in staff education provided to the department personnel.

(15) Initiate consultation requests to specialties and other health professionals to include physical therapists, occupational therapists, dieticians, as per written protocols and standing orders delineated in the memorandum of agreement with the Head, Obstetrics and Gynecology.

(16) Initiate temporary profiles not to exceed 30 days, either by assigning or removing duty limitations except for personnel on flying status.

(17) Admit and discharge to and from quarters for up to 72 hours with verbal concurrence of the supervising physician.

(18) Offer counseling and education on reproductive and related health issues including adolescence, sexuality, contraception, childbearing, parenting, menopause, situational stress, sexually transmitted diseases, sterilization and infertility.

- (19) Manage common gynecological and obstetric problems and illnesses.
 - (20) Counsel on family planning to include dispensing oral contraceptives, fitting diaphragms, inserting and removing intrauterine devices.
 - (21) Provide technical guidance, leadership and education to nursing personnel and ancillary staff.
 - (22) Provide counseling to those with an unwanted pregnancy.
 - (23) Educate appropriate groups in health matters such as pregnancy, childbirth, family planning, care of newborn, child rearing, cancer, detection, health maintenance, and use of community resources.
 - (24) Prescribe medications approved by the pharmacy and therapeutics committee and delineated in the memorandum of agreement/standing orders by the Head, Obstetrics and Gynecology.
 - (25) Provide emergency or crisis intervention including life saving emergency procedures.
 - (26) Participate in various sub-specialty clinics, providing direct patient care in accordance with standard medical protocols in one or more of the following areas: gynecologic oncology, general gynecology, obstetrics, reproductive endocrinology, colposcopy.
 - (27) Collaborate with physician in managing selected complex medical problems and make appropriate referrals.
 - (28) Participate in and conduct research studies relevant to women's health care issues.
- b. Licensed Nurse Practitioner (LPN): As assigned, each healthcare worker shall perform the duties given in Section C.7 of the basic contract.

PERSONAL QUALIFICATIONS SHEET – NURSE PRACTITIONER

1. Every item on the Personal Qualifications Sheet must be addressed. Please sign and date where indicated. Any additional information required may be provided on a separate sheet of paper (indicate by number and section the question(s) to be addressed).
2. The information you provide will be used to determine your acceptability based on Section C of the solicitation. In addition to the Personal Qualifications Sheet, please submit three letters of recommendation as described in Item VIII. of this Sheet.
3. After contract award, all of the information you provide will be verified during the credentialing process. At that time, you will be required to provide the following documentation verifying your qualifications: Professional Education Degree, Release of Information, Personal and Professional Information Sheet, all medical licenses held within the preceding 10 years, continuing education certificates, and employment eligibility documentation. If you submit false information, the following actions may occur:
 - a. Your contract may be terminated for default. This action may initiate the suspension and debarment process, which could result in the determination that you are no longer eligible for future Government contracts.
 - b. You may lose your clinical privileges. If that occurs, an adverse credentialing action report will be forwarded to your State licensing bureau and the National Practitioners Databank.
4. Unless otherwise specified, the Government reserves the right to transfer to the gaining Contractor the credentials of a health care worker who has been granted delineated clinical privileges on a predecessor contract without a new or additional credentialing action. This extension may only occur:
 - a. within the same command,
 - b. when there is no increased clinical competency requirement of the health care worker,
 - c. when there is no significant change in the scope of clinical practice of the health care worker,
 - d. when there is no gap in performance between the contracts and,
 - e. when the health care worker has had acceptable performance evaluations.
5. Health Certification. Individuals providing services under Government contracts are required to undergo a physical exam 60 days prior to beginning work. The exam is not required prior to award but is required prior to the performance of services under contract. By signing this form, you have acknowledged this requirement.

6. Practice Information:

Yes No

a. Have you ever been the subject of a malpractice claim? (indicate final disposition of case in comments)

b. Have you ever been a defendant in a felony or misdemeanor case? (indicate final disposition of case in comments)

c. Has your license to practice or DEA certification ever been revoked or restricted in any state?

If any of the above is answered "yes" attach a detailed explanation. Specifically address the disposition of the claim or charges for numbers 1 and 2 above, and the State of the revocation for number 3 above.

PRIVACY ACT STATEMENT

Under 5 U.S.C. 552a and Executive Order 9397, the information provided on these pages and the Personal Qualifications Sheet is requested for use in the consideration of a contract; disclosure of the information is voluntary; failure to provide information may result in the denial of the opportunity to enter into a contract.

Signature

Date (mm/dd/yy)

I. General Information

Name: _____ SSN: _____
Last, First Middle

Date of Birth: _____

Address: _____

Phone: (____) _____

II. Professional Education

A. Professional School:

Date of Training
(From) (To)

1. Name of ANA Accredited School: _____

2. Type and Date of Degree: _____

3. Address of School: _____

III. Professional Licensure

_____ State _____ Date of Expiration (mm/dd/yy)

IV. Professional Certification:

ANCC or AANP: _____
Date of Expiration (mm/dd/yy)

V. Professional Employment: List your current and preceding employers. Provide dates as month/year.

Name and Address of Present Employer From To

(1) _____

Work Performed: _____

Name and Address of Previous Employer From To

(2) _____

Work Performed: _____

(3) _____

Work Performed: _____

Are you currently employed on a Navy contract? _____
If so where is your current contract and what is the position? _____
When does the contract expire? _____

VI. Continuing Education:

Title of Course	From	To	CE Hours

VII. Employment Eligibility: Yes No

Do you meet the requirements for U.S. Employment Eligibility contained in Section VII? _____

VIII. Professional References

Provide letters of recommendation from three practicing physicians attesting to your clinical skills. Reference letters must include name, title, phone number, date of reference, address and signature of the individual providing reference. Letters of reference must have been written within the preceding 5 years.

IX. Additional Information

Provide any additional information you feel may enhance your ranking such as your resume, curriculum vitae, commendations or documentation of any awards you may have received, etc.

X. I hereby certify the above information to be true and accurate:

Signature

Date (mm/dd/yy)

PERSONAL QUALIFICATIONS SHEET – LICENSED PRACTICAL/VOCATIONAL NURSE

1. Every item on the Personal Qualifications Sheet must be addressed. Please sign and date where indicated. Any additional information required may be provided on a separate sheet of paper (indicate by number and section the question(s) to be addressed).
2. The information you provide will be used to determine your acceptability based on Section C of the solicitation. In addition to the Personal Qualifications Sheet, please submit three letters of recommendation as described in Item VIII. of this Sheet.
3. After contract award, all of the information you provide will be verified during the credentialing process. At that time, you will be required to provide the following documentation verifying your qualifications: Professional Education Degree, Release of Information, Personal and Professional Information Sheet, all medical licenses held within the preceding 10 years, continuing education certificates, and employment eligibility documentation. If you submit false information, the following actions may occur:
 - a. Your contract may be terminated for default. This action may initiate the suspension and debarment process, which could result in the determination that you are no longer eligible for future Government contracts.
 - b. You may lose your clinical privileges. If that occurs, an adverse credentialing action report will be forwarded to your State licensing bureau and the National Practitioners Databank.
4. Unless otherwise specified, the Government reserves the right to transfer to the gaining Contractor the credentials of a health care worker who has been granted delineated clinical privileges on a predecessor contract without a new or additional credentialing action. This extension may only occur:
 - a. within the same command,
 - b. when there is no increased clinical competency requirement of the health care worker,
 - c. when there is no significant change in the scope of clinical practice of the health care worker,
 - d. when there is no gap in performance between the contracts and,
 - e. when the health care worker has had acceptable performance evaluations.
5. Health Certification. Individuals providing services under Government contracts are required to undergo a physical exam 60 days prior to beginning work. The exam is not required prior to award but is required prior to the performance of services under contract. By signing this form, you have acknowledged this requirement.

6. Practice Information:

	Yes	No
a. Have you ever been the subject of a malpractice claim? (indicate final disposition of case in comments)	_____	_____
b. Have you ever been a defendant in a felony or misdemeanor case? (indicate final disposition of case in comments)	_____	_____
c. Has your license to practice or DEA certification ever been revoked or restricted in any state?	_____	_____

If any of the above is answered "yes" attach a detailed explanation. Specifically address the disposition of the claim or charges for numbers 1 and 2 above, and the State of the revocation for number 3 above.

PRIVACY ACT STATEMENT

Under 5 U.S.C. 552a and Executive Order 9397, the information provided on these pages and the Personal Qualifications Sheet is requested for use in the consideration of a contract; disclosure of the information is voluntary; failure to provide information may result in the denial of the opportunity to enter into a contract.

Signature

Date (mm/dd/yy)

I. General Information

Name: _____ SSN: _____
Last, First Middle

Date of Birth: _____

Address: _____

Phone: (____) _____

II. Professional Education

A. Professional School:

Date of Training
(From) (To)

1. Name of School: _____

2. Type and Date of Degree: _____

3. Address of School: _____

III. Professional Licensure

_____ State _____ Date of Expiration (mm/dd/yy)

IV. Professional Employment: List your current and preceding employers. Provide dates as month/year.

Name and Address of Present Employer From To

(1) _____

Work Performed: _____

Name and Address of Previous Employer From To

(2) _____

Work Performed: _____

(3) _____

Work Performed: _____

Are you are currently employed on a Navy contract? _____

If so where is your current contract and what is the position?

When does the contract expire? _____

V. Continuing Education:

Title of Course	From	To	CE Hours

VI. Certification, Degrees, or Licensure: This should include BLS, NRP, ACLS, etc.

Type of Certification, Degree or License and Date of Certification or Expiration: _____

VII. Employment Eligibility: Yes No

Do you meet the requirements for U.S. Employment Eligibility contained in Section VII? _____

VIII. Professional References

Provide letters of recommendation from three practicing physicians attesting to your clinical skills. Reference letters must include name, title, phone number, date of reference, address and signature of the individual providing reference. Letters of reference must have been written within the preceding 5 years.

IX. Additional Information

Provide any additional information you feel may enhance your ranking such as your resume, curriculum vitae, commendations or documentation of any awards you may have received, etc.

X. I hereby certify the above information to be true and accurate:

Signature

Date (mm/dd/yy)

ATTACHMENT IV - SUPPLEMENTAL PRICING WORKSHEET

In accordance with Section L, paragraph L.7, the Contracting Officer will use the information from this supplemental pricing worksheet to determine price realism. The total health care worker compensation reported on this supplemental pricing worksheet shall reflect the lowest acceptable compensation rate that will be paid to a health care worker upon contract or task order award. The task order awardee is not prohibited from paying a range of compensation rates to recruited health care workers in a particular labor category, but under no circumstances shall the compensation rate be lower than that included in the Supplemental Pricing Worksheet. A supplemental pricing worksheet shall be prepared for each separately priced CLIN/SLIN.

Minimum compensation the Health Care Worker will receive per hour:

	CLIN _____
i. Hourly Rate	\$ _____
ii. *Fringe Benefits	\$ _____

TOTAL HEALTH CARE WORKER
COMPENSATION per hour \$ _____

*Fringe Benefits include non-cash compensation provided to employees to comply with Department of Labor compensation.

Samples of fringe benefits include: 401(k), Insurance (Medical/Dental/Life), Continuing Education Expenses, Bonuses, Incentives, and Uniform Allowance.

Other fringe benefits offered but not listed above (please specify):

Signature

Date

Title

Organization

ATTACHMENT V - HEALTH CARE WORKER CERTIFICATE OF AVAILABILITY

I, _____ [NAME OF HEALTH CARE WORKER/PROVIDER] hereby certify that I have agreed to provide services as a _____ (please specify health care worker position) under this solicitation at (fill in the location) _____ as a subcontractor/employee (CIRCLE ONE) for _____ [NAME OF PRIME CONTRACTOR] for the salary of \$ _____ per hour (or \$ _____ per annum). I am available to begin providing these services from _____, should the above named prime contractor be awarded this position.

Health Care Worker Signature

Date

HEALTH CARE WORKER MUST CIRCLE EITHER SUBCONTRACTOR OR EMPLOYEE ABOVE.

TO BE COMPLETED BY THE OFFEROR

If my company is awarded a contract as a result of this solicitation, I verify that the above health care worker will be:

___ my employee, or

___ a subcontractor

Check one of the above.

Signature and title

Date

NOTIONAL TASK ORDER 00001 - USNS COMFORT BACKFILL

This is not a minimum quantity being purchased at this time. This task order is for evaluation purposes only. This task order must be completed by the offeror in order to be eligible for award.

All terms and conditions contained within this solicitation and its attachments apply to Notional Task Order 00001 and Notional Task Order 00002.

1. Services. The contractor shall supply nursing services personnel at the National Naval Medical Center (NNMC), Bethesda, MD to backfill for personnel deployed with the USNS Comfort from approximately 9 June 2001 through 30 June 2001. The labor categories and numbers of personnel per category are as follows:

Registered Nurses:

Medical-Surgical/SSU
Critical Care (ICU/CCU)
Labor/Delivery/Recovery/Post Partum

Licensed Practical Nurses:

Medical-Surgical/SSU
Critical Care (ICU/CICU/PACU)
Labor/Delivery/Recovery/Post Partum

2. Duty Hours

2.1 Each healthcare worker shall provide services for an 12 ³/₄ - hour period per day including an uncompensated ³/₄ -hour meal period. Specific duty hours will be scheduled by the Department Head of the assigned department.

2.2 For all labor categories the hours of service shall generally be Sunday through Saturday from 0645 to 1915 for the day shift and 1845 to 0715 for the night shift.

2.3 The Government is buying coverage of health care worker services, therefore there are no provisions for leave (annual or sick) for contract employees in this contract.

2.4 The Medical-Surgical/SSU RNs shall generally fill shifts according to the following schedule:

	Number of Medical-Surgical RNs per shift						
Shift	Sun	Mon	Tue	Wed	Thu	Fri	Sat
Day (0645-1915)	2	5	5	5	6	6	4
Night (1845-0715)	2	6	6	6	6	6	4

2.5 The Critical Care RNs shall generally fill shifts according to the following schedule:

	Number of Medical-Surgical LPNs per shift						
Shift	Sun	Mon	Tue	Wed	Thu	Fri	Sat
Day (0645-1915)	2	2	2	2	2	2	2
Night (1845-0715)	1	1	1	1	1	1	1

2.6 The Labor/Delivery/Recovery/Post Partum RNs shall generally fill shifts according to the following schedule:

	Number of Medical-Surgical LPNs per shift						
Shift	Sun	Mon	Tue	Wed	Thu	Fri	Sat
Day (0645-1915)	2	3	3	2	3	3	2
Night (1845-0715)	2	2	2	2	2	2	2

2.7 The Medical-Surgical/SSU LPNs shall generally fill shifts according to the following schedule:

	Number of Medical-Surgical LPNs per shift						
Shift	Sun	Mon	Tue	Wed	Thu	Fri	Sat
Day (0645-1915)	0	3	3	3	3	3	0
Night (1845-0715)	0	4	4	4	4	4	0

2.8 The Critical Care LPNs shall generally fill shifts according to the following schedule:

	Number of Short Stay Unit LPNs per shift						
Shift	Sun	Mon	Tue	Wed	Thu	Fri	Sat
Day (0645-1915)	2	3	3	3	3	3	2
Night (1845-0715)	2	3	3	3	3	3	2

2.9 The Labor/Delivery/Recovery/Post Partum LPNs shall generally fill shifts according to the following schedule:

	Number of Short Stay Unit LPNs per shift						
Shift	Sun	Mon	Tue	Wed	Thu	Fri	Sat
Day (0645-1915)	4	4	4	4	4	4	4
Night (1845-0715)	4	4	4	4	4	4	4

1) NOTIONAL TASK ORDER 00001 – PRICING SHEET

Contractor: _____ **Contract Number:** _____

a)

	DESCRIPTION		QTY	UNIT	UNIT PRICE	TOTAL
0001	MEDICAL-SURGICAL/SSU RNS					
0001AA	12D	0645-1915	1068	Hours	\$	\$
0001AB	12N	1845-0715	1092	Hours	\$	\$
	Total Price for CLIN 0001				\$	\$
0002	CRITICAL CARE RNS					
0002AA	12D	0645-1915	432	Hours	\$	\$
0002AB	12N	1845-0715	276	Hours	\$	\$
	Total Price for CLIN 0002				\$	\$
0003	LABOR/DELIVERY/RECOVER/POST PARTUM RNS					
0003AA	12D	0645-1915	552	Hours	\$	\$
0003AB	12N	1845-0715	432	Hours	\$	\$
	Total Price for CLIN 0003				\$	\$
0004	MEDICAL-SURGICAL/SSU LPNS					
0004AA	12D	0645-1915	1056	Hours	\$	\$
0004AB	12N	1845-0715	1428	Hours	\$	\$
	Total Price for CLIN 0004				\$	\$
0005	CRITICAL CARE LPNS					
0005AA	12D	0645-1915	588	Hours	\$	\$
0005AB	12N	1845-0715	588	Hours	\$	\$
	Total Price for CLIN 0005				\$	\$
0006	LABOR/DELIVERY/RECOVER/POST PARTUM LPNS					
0006AA	12D	0645-1915	864	Hours	\$	\$
0006AB	12N	1845-0715	864	Hours	\$	\$
	Total Price for CLIN 0006				\$	\$
	Total Price for CLINS 0001 - 0006				\$	\$

NOTIONAL TASK ORDER 00002 – NAVAL MEDICAL CLINIC, QUANTICO

This is not a minimum quantity being purchased at this time. This task order is for evaluation purposes only. This task order must be completed by the offeror in order to be eligible for award.

All terms and conditions contained within this solicitation and its attachments apply to Notional Task Order 00001 and Notional Task Order 00002.

1. **Services.** The contractor shall supply two Health Educators at the Naval Medical Clinic, Quantico, VA.

2. Duty Hours

2.1 The healthcare worker shall provide services for a 9 hour period per day including an uncompensated 1 hour meal period. Specific duty hours will be scheduled by the Department Head of the assigned department.

2.2 The 9 hours of service shall generally be Monday through Friday ranging from 0630 to 1630. Specific hours may change at the discretion of the Commanding Officer. In no instance will the health care worker be required to provide services in excess of 40 hours per week.

3. Absences And Leave

3.1 The health care worker shall accrue 8 hours of paid leave, combined annual (vacation) and sick leave, at the end of every 2-week period worked.

3.2 A health care worker with a bonafide medical emergency occurring while on duty or with an on-the-job injury will be provided medical care until the condition is stabilized. The contractor will reimburse the Government for all medical services provided.

3.3 If a health care worker becomes ill or is otherwise unable to fulfill his/her obligation to work, they shall notify the contractor who in turn shall notify the COR.

3.4 If the health care worker is absent for three or more consecutive days due to illness, he or she may be required by the Commanding Officer to provide written documentation from a qualified health care provider that he or she is free from communicable disease and the cause of the health care worker's current illness. The Government reserves the right to examine and/or re-examine any health care worker who meets this criterion.

3.5 Administrative Leave. For unusual and compelling circumstances, (for example, weather emergencies), in which the Commanding Officer either excuses all personnel on the naval base from reporting to work or dismisses all personnel early, the Commanding Officer is authorized to grant administrative leave to the health care worker. This administrative leave may be compensated leave.

3.6 Furlough. Unless otherwise authorized by a defense appropriations bill, contractors shall not be reimbursed by the Government for services not rendered during a government furlough. In the event of a Government Furlough, the Commanding Officer will determine which contract employees are considered critical and therefore must report to work. Contract employees deemed critical shall be compensated for services rendered during a furlough. All other contract employees shall be furloughed until the Government shutdown ends or they are notified by the COR that they have become a critical employee.

b) *NOTIONAL TASK ORDER 00002 – PRICING SHEET*

Contractor: _____ **Contract Number:** _____

Item No.	Description	Quantity	Unit	Price	Total Amount
0001	The contractor shall perform full-time (40 hours per week) Health Educator Services at the Naval Medical Clinic, Quantico, VA in accordance with Section C.				
0001AA	Health Educator	4160	HRS	\$_____	

ATTACHMENT VIII - LISTS OF ACCEPTABLE DOCUMENTS THAT ESTABLISH IDENTITY AND EMPLOYMENT ELIGIBILITY			
LIST A Documents that Establish Both Identity and Employment Eligibility	<u>OR</u>	LIST B Documents that <u>AND</u> Employment Eligibility	LIST C Documents that Establish Identity
1. U. S. Passport (unexpired or expired) 2. Certificate of U.S. Citizenship (INS Form N-560 or N-561) 3. Certificate of Naturalization (INS Form N-550 or N-570) 4. Unexpired foreign passport, with I-551 stamp or attached INS Form I-94 indicating Unexpired employment Authorization 5. Alien Registration Receipt Card with photograph (INS Form I-151 or I-551) 6. Unexpired Temporary Resident Card (INS Form I-688) 7. Unexpired Employment Authorization Card (INS Form I-688A) 8. Unexpired Reentry Permit (INS Form I-327) 9. Unexpired Refugee Travel Document (INS Form I-571) 10. Unexpired Employment Authorization Document issued by the INS which contains a photograph (INS Form I-688B)		1. Driver's license or ID card issued by a state or outlying possession of the United States provided it contains a photograph or information such as name, date of birth, sex, height, eye color, and address 2. ID card issued by federal, state or local government agencies of entities provided it contains a photograph or information such as name, date of birth, sex, height, eye color, and address 3. School ID card with a photograph 4. Voter's registration card 5. U.S. Military card or draft record 6. Military dependent's ID card 7. U.S. Coast Guard Merchant Mariner Card 8. Native American tribal document 9. Driver's license issued by a Canadian government authority For persons under age 18 who are unable to present a document listed above: 10. School record or report card 11. Clinic, doctor, or hospital record 12. Day-care or nursery school record	1. U.S. Social Security Card issued by the Social Security Administration (other than a card stating it is not valid for employment) 2. Certification of Birth Abroad issued by the Department of State (Form FS-545 or Form DS-1350) 3. Original or certified copy of a birth certificate issued by a state, county, municipal authority or outlying possession of the United States bearing an official seal 4. Native American tribal document 5. U.S. Citizen ID Card (INS Form I-197) 6. ID Card for use of Resident Citizen in the United States (INS Form I-179) 7. Unexpired employment authorization document issued by the INS (other than those listed under List A)

ATTACHMENT IX - WAGE DETERMINATION 94-2103
WAGE DETERMINATION NO: 94-2103 REV (22) AREA: DC,DISTRICT-WIDE

WAGE DETERMINATION NO: 94-2103 REV (22) AREA: DC,DISTRICT-WIDE
REGISTER OF WAGE DETERMINATIONS UNDER | U.S. DEPARTMENT OF LABOR
FOR OFFICIAL USE ONLY BY FEDERAL AGENCIES PARTICIPATING IN MOU WITH DOL

WASHINGTON D.C. 20210

Wage Determination No.: 1994-2103

William W.Gross Division of | Revision No.: 22

Director Wage Determinations| Date Of Last Revision: 09/13/2000

States: District of Columbia, Maryland, Virginia

Area: District of Columbia Statewide

Maryland Counties of Calvert, Charles, Frederick, Montgomery, Prince George's, St Mary's

Virginia Counties of Alexandria, Arlington, Fairfax, Falls Church, Fauquier, King George, Loudoun, Prince

William, Stafford

Fringe Benefits Required Follow the Occupational Listing

OCCUPATION TITLE	MINIMUM WAGE RATE
------------------	-------------------

Administrative Support and Clerical Occupations

Accounting Clerk I	10.16
Accounting Clerk II	11.88
Accounting Clerk III	14.04
Accounting Clerk IV	16.37
Court Reporter	13.68
Dispatcher, Motor Vehicle	14.33
Document Preparation Clerk	11.29
Duplicating Machine Operator	11.29
Film/Tape Librarian	13.64
General Clerk I	9.30
General Clerk II	10.92
General Clerk III	12.20
General Clerk IV	17.04
Housing Referral Assistant	17.20
Key Entry Operator I	10.40
Key Entry Operator II	11.62
Messenger (Courier)	9.30
Order Clerk I	11.65
Order Clerk II	12.88
Personnel Assistant (Employment) I	11.49
Personnel Assistant (Employment) II	12.54
Personnel Assistant (Employment) III	14.46
Personnel Assistant (Employment) IV	17.24
Production Control Clerk	16.30
Rental Clerk	14.02
Scheduler, Maintenance	14.02
Secretary I	14.02
Secretary II	15.35
Secretary III	17.21
Secretary IV	19.57
Secretary V	22.01
Service Order Dispatcher	12.50
Stenographer I	13.72
Stenographer II	15.39
Supply Technician	19.57
Survey Worker (Interviewer)	13.68
Switchboard Operator-Receptionist	10.64
Test Examiner	15.35
Test Proctor	15.35
Travel Clerk I	9.19

Travel Clerk II	9.87
Travel Clerk III	10.60
Word Processor I	10.85
Word Processor II	12.47
Word Processor III	15.47
Automatic Data Processing Occupations	
Computer Data Librarian	10.56
Computer Operator I	10.59
Computer Operator II	12.48
Computer Operator III	15.13
Computer Operator IV	17.11
Computer Operator V	18.41
Computer Programmer I (1)	17.08
Computer Programmer II (1)	20.04
Computer Programmer III (1)	23.46
Computer Programmer IV (1)	27.21
Computer Systems Analyst I (1)	21.34
Computer Systems Analyst II (1)	27.62
Computer Systems Analyst III (1)	27.62
Peripheral Equipment Operator	11.87
Automotive Service Occupations	
Automotive Body Repairer, Fiberglass	19.03
Automotive Glass Installer	17.03
Automotive Worker	17.03
Electrician, Automotive	18.05
Mobile Equipment Servicer	14.94
Motor Equipment Metal Mechanic	19.03
Motor Equipment Metal Worker	17.03
Motor Vehicle Mechanic	19.11
Motor Vehicle Mechanic Helper	13.85
Motor Vehicle Upholstery Worker	16.01
Motor Vehicle Wrecker	17.03
Painter, Automotive	18.05
Radiator Repair Specialist	17.03
Tire Repairer	14.43
Transmission Repair Specialist	19.03
Food Preparation and Service Occupations	
Baker	11.87
Cook I	10.41
Cook II	11.87
Dishwasher	8.60
Food Service Worker	8.19
Meat Cutter	13.65
Waiter/Waitress	8.17
Furniture Maintenance and Repair Occupations	
Electrostatic Spray Painter	18.05
Furniture Handler	12.55
Furniture Refinisher	18.05
Furniture Refinisher Helper	13.85
Furniture Repairer, Minor	16.01
Upholsterer	18.05
General Services and Support Occupations	
Cleaner, Vehicles	8.21
Elevator Operator	8.60
Gardener	11.94
House Keeping Aid I	7.67
House Keeping Aid II	8.50
Janitor	8.47
Laborer, Grounds Maintenance	9.37
Maid or Houseman	7.61
Pest Controller	11.17
Refuse Collector	8.60

Tractor Operator	11.07
Window Cleaner	9.23
Health Occupations	
Dental Assistant	12.21
Emergency Medical Technician (EMT)/Paramedic/ Ambulance Driver	11.95
Licensed Practical Nurse I	14.11
Licensed Practical Nurse II	15.84
Licensed Practical Nurse III	17.73
Medical Assistant	10.92
Medical Laboratory Technician	10.92
Medical Record Clerk	10.92
Medical Record Technician	13.15
Nursing Assistant I	7.53
Nursing Assistant II	8.47
Nursing Assistant III	10.85
Nursing Assistant IV	12.18
Pharmacy Technician	11.84
Phlebotomist	10.19
Registered Nurse I	18.90
Registered Nurse II	21.19
Registered Nurse II, Specialist	21.19
Registered Nurse III	25.65
Registered Nurse III, Anesthetist	25.65
Registered Nurse IV	30.74
Information and Arts Occupations	
Audiovisual Librarian	18.95
Exhibits Specialist I	15.64
Exhibits Specialist II	19.56
Exhibits Specialist III	24.08
Illustrator I	15.64
Illustrator II	19.56
Illustrator III	24.08
Librarian	21.32
Library Technician	13.99
Photographer I	13.93
Photographer II	15.64
Photographer III	19.56
Photographer IV	24.08
Photographer V	26.50
Laundry, Dry Cleaning, Pressing and Related Occupations	
Assembler	6.93
Counter Attendant	6.93
Dry Cleaner	8.94
Finisher, Flatwork, Machine	6.93
Presser, Hand	6.93
Presser, Machine, Drycleaning	6.93
Presser, Machine, Shirts	6.93
Presser, Machine, Wearing Apparel, Laundry	6.93
Sewing Machine Operator	9.66
Tailor	10.35
Washer, Machine	7.60
Machine Tool Operation and Repair Occupations	
Machine-Tool Operator (Toolroom)	18.05
Tool and Die Maker	21.95
Material Handling and Packing Occupations	
Forklift Operator	12.68
Fuel Distribution System Operator	17.62
Material Coordinator	16.10
Material Expediter	16.10
Material Handling Laborer	10.36
Order Filler	13.21

Production Line Worker (Food Processing)	11.64
Shipping Packer	12.21
Shipping/Receiving Clerk	13.09
Stock Clerk (Shelf Stocker; Store Worker II)	12.09
Store Worker I	8.61
Tools and Parts Attendant	14.77
Warehouse Specialist	13.05
Mechanics and Maintenance and Repair Occupations	
Aircraft Mechanic	19.95
Aircraft Mechanic Helper	14.51
Aircraft Quality Control Inspector	21.01
Aircraft Servicer	16.78
Aircraft Worker	17.84
Appliance Mechanic	18.05
Bicycle Repairer	14.43
Cable Splicer	19.03
Carpenter, Maintenance	18.05
Carpet Layer	17.44
Electrician, Maintenance	19.20
Electronics Technician, Maintenance I	16.05
Electronics Technician, Maintenance II	20.49
Electronics Technician, Maintenance III	22.31
Fabric Worker	15.76
Fire Alarm System Mechanic	19.03
Fire Extinguisher Repairer	14.94
Fuel Distribution System Mechanic	19.03
General Maintenance Worker	16.46
Heating, Refrigeration and Air Conditioning Mechanic	19.03
Heavy Equipment Mechanic	19.03
Heavy Equipment Operator	19.31
Instrument Mechanic	19.03
Laborer	10.04
Locksmith	18.05
Machinery Maintenance Mechanic	20.51
Machinist, Maintenance	21.52
Maintenance Trades Helper	13.85
Millwright	19.03
Office Appliance Repairer	18.05
Painter, Aircraft	18.05
Painter, Maintenance	18.05
Pipefitter, Maintenance	18.39
Plumber, Maintenance	18.05
Pneudraulic Systems Mechanic	19.03
Rigger	19.03
Scale Mechanic	17.03
Sheet-Metal Worker, Maintenance	19.03
Small Engine Mechanic	20.05
Telecommunication Mechanic I	19.03
Telecommunication Mechanic II	20.05
Telephone Lineman	19.03
Welder, Combination, Maintenance	19.03
Well Driller	19.03
Woodcraft Worker	19.03
Woodworker	15.32
Miscellaneous Occupations	
Animal Caretaker	8.91
Carnival Equipment Operator	11.11
Carnival Equipment Repairer	11.97
Carnival Worker	7.48
Cashier	7.75
Desk Clerk	9.78
Embalmer	19.04

Lifeguard	8.89
Mortician	21.63
Park Attendant (Aide)	11.17
Photofinishing Worker (Photo Lab Tech., Darkroom Tech)	9.03
Recreation Specialist	15.94
Recycling Worker	11.11
Sales Clerk	8.03
School Crossing Guard (Crosswalk Attendant)	8.60
Sport Official	8.89
Survey Party Chief (Chief of Party)	12.33
Surveying Aide	7.33
Surveying Technician (Instr. Person/Surveyor Asst./Instr.)	11.21
Swimming Pool Operator	11.87
Vending Machine Attendant	9.68
Vending Machine Repairer	11.90
Vending Machine Repairer Helper	9.68
Personal Needs Occupations	
Child Care Attendant	8.99
Child Care Center Clerk	12.54
Chore Aid	7.61
Homemaker	14.35
Plant and System Operation Occupations	
Boiler Tender	19.03
Sewage Plant Operator	18.05
Stationary Engineer	19.03
Ventilation Equipment Tender	13.85
Water Treatment Plant Operator	18.05
Protective Service Occupations	
Alarm Monitor	12.39
Corrections Officer	17.69
Court Security Officer	18.18
Detention Officer	17.69
Firefighter	18.84
Guard I	8.80
Guard II	11.59
Police Officer	20.49
Stevedoring/Longshoremen Occupations	
Blocker and Bracer	16.46
Hatch Tender	14.31
Line Handler	14.31
Stevedore I	15.47
Stevedore II	17.45
Technical Occupations	
Air Traffic Control Specialist, Center (2)	26.40
Air Traffic Control Specialist, Station (2)	18.14
Air Traffic Control Specialist, Terminal (2)	20.30
Archeological Technician I	14.11
Archeological Technician II	15.78
Archeological Technician III	19.56
Cartographic Technician	22.50
Civil Engineering Technician	19.56
Computer Based Training (CBT) Specialist/ Instructor	21.34
Drafter I	11.84
Drafter II	14.82
Drafter III	16.64
Drafter IV	20.81
Engineering Technician I	13.74
Engineering Technician II	15.95
Engineering Technician III	19.17
Engineering Technician IV	21.99
Engineering Technician V	26.90
Engineering Technician VI	32.55

Environmental Technician	18.91	
Flight Simulator/Instructor (Pilot)	27.76	
Graphic Artist	18.56	
Instructor	21.90	
Laboratory Technician	15.13	
Mathematical Technician	19.13	
Paralegal/Legal Assistant I	14.53	
Paralegal/Legal Assistant II	18.53	
Paralegal/Legal Assistant III	22.67	
Paralegal/Legal Assistant IV	27.43	
Photooptics Technician	21.06	
Technical Writer	19.90	
Unexploded (UXO) Safety Escort	16.92	
Unexploded (UXO) Sweep Personnel	16.92	
Unexploded Ordnance (UXO) Technician I	16.92	
Unexploded Ordnance (UXO) Technician II	20.47	
Unexploded Ordnance (UXO) Technician III	24.53	
Weather Observer, Combined Upper Air and Surface Programs (3)	15.13	15.13
Weather Observer, Senior (3)	17.62	
Weather Observer, Upper Air (3)	15.13	
Transportation/ Mobile Equipment Operation Occupations		
Bus Driver	13.70	
Parking and Lot Attendant	8.62	
Shuttle Bus Driver	11.76	
Taxi Driver	10.01	
Truckdriver, Heavy Truck	17.52	
Truckdriver, Light Truck	11.78	
Truckdriver, Medium Truck	14.97	
Truckdriver, Tractor-Trailer	17.52	

ALL OCCUPATIONS LISTED ABOVE RECEIVE THE FOLLOWING BENEFITS:

HEALTH & WELFARE: \$1.92 an hour or \$76.80 a week or \$332.80 a month.

VACATION: 2 weeks paid vacation after 1 year of service with a contractor or successor; 3 weeks after 5 years, and 4 weeks after 15 years. Length of service includes the whole span of continuous service with the present contractor or successor, wherever employed, and with the predecessor contractors in the performance of similar work at the same Federal facility. (Reg. 29 CFR 4.173)

HOLIDAYS: A minimum of ten paid holidays per year: New Year's Day, Martin Luther King Jr.'s Birthday, Washington's Birthday, Memorial Day, Independence Day, Labor Day, Columbus Day, Veterans' Day, Thanksgiving Day, and Christmas Day. (A contractor may substitute for any of the named holidays another day off with pay in accordance with a plan communicated to the employees involved.) (See 29 CFR 4.174)

THE OCCUPATIONS WHICH HAVE PARENTHESES AFTER THEM RECEIVE THE FOLLOWING BENEFITS (as numbered):

1) Does not apply to employees employed in a bona fide executive, administrative, or professional capacity as defined and delineated in 29 CFR 541. (See CFR 4.156)

2) **APPLICABLE TO AIR TRAFFIC CONTROLLERS ONLY - NIGHT DIFFERENTIAL:** An employee is entitled to pay for all work performed between the hours of 6:00 P.M. and 6:00 A.M. at the rate of basic pay plus a night pay differential amounting to 10 percent of the rate of basic pay.

3) **WEATHER OBSERVERS - NIGHT PAY & SUNDAY PAY:** If you work at night as part of a regular tour of duty, you will earn a night differential and receive an additional 10% of basic pay for any hours worked between 6pm and 6am. If you are a full-time employed (40 hours a week) and Sunday is part of your regularly scheduled workweek, you are paid at your rate of basic pay plus a Sunday premium of 25% of your basic rate for each hour of Sunday work which is not overtime (i.e. occasional work on Sunday outside the normal tour of duty is considered overtime work).

HAZARDOUS PAY DIFFERENTIAL: An 8 percent differential is applicable to employees employed in a position that represents a high degree of hazard including working with or in close proximity to explosives and incendiary materials involved in research, testing, manufacturing, inspection, renovation, maintenance, and disposal. Such as: Screening, blending, dying, mixing, and pressing of sensitive explosives pyrotechnic compositions such as lead azide, black powder and photoflash power. All dry-house activities involving propellants or explosives. Demilitarization, modification, renovation, demolition, and maintenance operations on sensitive explosives and incendiary materials. All operations involving regarding and cleaning of artillery ranges. A 4 percent differential is applicable to employees employed in a position that represents a low degree of hazard. Including working with or in close proximity to explosives and incendiary materials which involves potential injury such as laceration of hands,

face, or arms of the employee engaged in the operation and, possibly adjacent employees, irritation of the skin, minor burns and the like; minimal damage to immediate or adjacent work area or equipment being used. All operations involving, unloading, storage, and hauling of explosive and incendiary ordnance material other than small arms ammunition. (Distribution of raw nitroglycerine is covered under high degree hazard.)

**** UNIFORM ALLOWANCE ****

If employees are required to wear uniforms in the performance of this contract (either by the terms of the Government contract, by the employer, by the state or local law, etc.), the cost of furnishing such uniforms and maintaining (by laundering or dry cleaning) such uniforms is an expense that may not be borne by an employee where such cost reduces the hourly rate below that required by the wage determination. The Department of Labor will accept payment in accordance with the following standards as compliance: The contractor or subcontractor is required to furnish all employees with an adequate number of uniforms without cost or to reimburse employees for the actual cost of the uniforms. In addition, where uniform cleaning and maintenance is made the responsibility of the employee, all contractors and subcontractors subject to this wage determination shall (in the absence of a bona fide collective bargaining agreement providing for a different amount, or the furnishing of contrary affirmative proof as to the actual cost), reimburse all employees for such cleaning and maintenance at a rate of \$3.35 per week (or \$.67 cents per day). However, in those instances where the uniforms furnished are made of "wash and wear" materials, may be routinely washed and dried with other personal garments, and do not require any special treatment such as dry cleaning, daily washing, or commercial laundering in order to meet the cleanliness or appearance standards set by the terms of the Government contract, by the contractor, by law, or by the nature of the work, there is no requirement that employees be reimbursed for uniform maintenance costs.

**** NOTES APPLYING TO THIS WAGE DETERMINATION ****

Source of Occupational Title and Descriptions:

The duties of employees under job titles listed are those described in the "Service Contract Act Directory of Occupations," Fourth Edition, January 1993, as amended by the Third Supplement, dated March 1997, unless otherwise indicated. This publication may be obtained from the Superintendent of Documents, at 202-783-3238, or by writing to the Superintendent of Documents, U.S. Government Printing Office, Washington, D.C. 20402. Copies of specific job descriptions may also be obtained from the appropriate contracting officer.

REQUEST FOR AUTHORIZATION OF ADDITIONAL CLASSIFICATION AND WAGE RATE {Standard Form 1444 (SF 1444)}

Conformance Process:

The contracting officer shall require that any class of service employee which is not listed herein and which is to be employed under the contract (i.e., the work to be performed is not performed by any classification listed in the wage determination), be classified by the contractor so as to provide a reasonable relationship (i.e., appropriate level of skill comparison) between such unlisted classifications and the classifications listed in the wage determination. Such conformed classes of employees shall be paid the monetary wages and furnished the fringe benefits as are determined. Such conforming process shall be initiated by the contractor prior to the performance of contract work by such unlisted class(es) of employees. The conformed classification, wage rate, and/or fringe benefits shall be retroactive to the commencement date of the contract. {See Section 4.6 (C)(vi)} When multiple wage determinations are included in a contract, a separate SF 1444 should be prepared for each wage determination to which a class(es) is to be conformed.

The process for preparing a conformance request is as follows:

- 1) When preparing the bid, the contractor identifies the need for a conformed occupation(s) and computes a proposed rate(s).
- 2) After contract award, the contractor prepares a written report listing in order proposed classification title(s), a Federal grade equivalency (FGE) for each proposed classification(s), job description(s), and rationale for proposed wage rate(s), including information regarding the agreement or disagreement of the authorized representative of the employees involved, or where there is no authorized representative, the employees themselves. This report should be submitted to the contracting officer no later than 30 days after such unlisted class(es) of employees performs any contract work.
- 3) The contracting officer reviews the proposed action and promptly submits a report of the action, together with the agency's recommendations and pertinent information including the position of the contractor and the employees, to the Wage and Hour Division, Employment Standards Administration, U.S. Department of Labor, for review. (See section 4.6(b)(2) of Regulations 29 CFR Part 4).
- 4) Within 30 days of receipt, the Wage and Hour Division approves, modifies, or disapproves the action via transmittal to the agency contracting officer, or notifies the contracting officer that additional time will be required to process the request.
- 5) The contracting officer transmits the Wage and Hour decision to the contractor.
- 6) The contractor informs the affected employees. Information required by the Regulations must be submitted on SF 1444 or bond paper. When preparing a conformance request, the "Service Contract Act Directory of Occupations"

(the Directory) should be used to compare job definitions to insure that duties requested are not performed by a classification already listed in the wage determination. Remember, it is not the job title, but the required tasks that

determine whether a class is included in an established wage determination. Conformances may not be used to artificially split, combine, or subdivide classifications listed in the wage determination.

ATTACHMENT X - WAGE DETERMINATION NO. 92-2247

WAGE DETERMINATION NO: 94-2247 REV (17) AREA: MD,BALTIMORE

WAGE DETERMINATION NO: 94-2247 REV (17) AREA: MD,BALTIMORE

REGISTER OF WAGE DETERMINATIONS UNDER | U.S. DEPARTMENT OF LABOR

FOR OFFICIAL USE ONLY BY FEDERAL AGENCIES PARTICIPATING IN MOU WITH DOL

WASHINGTON D.C. 20210

Wage Determination No.: 1994-2247

William W.Gross Division of | Revision No.: 17

Director Wage Determinations| Date Of Last Revision: 09/15/2000

State: Maryland

Area: Maryland Counties of Anne Arundel, Baltimore, Baltimore City, Carroll, Harford,

Howard

Fringe Benefits Required Follow the Occupational Listing

OCCUPATION TITLE	MINIMUM WAGE RATE
Administrative Support and Clerical Occupations	
Accounting Clerk I	8.95
Accounting Clerk II	10.32
Accounting Clerk III	11.62
Accounting Clerk IV	14.78
Court Reporter	12.32
Dispatcher, Motor Vehicle	12.32
Document Preparation Clerk	10.11
Duplicating Machine Operator	10.11
Film/Tape Librarian	11.22
General Clerk I	7.17
General Clerk II	8.77
General Clerk III	10.11
General Clerk IV	11.16
Housing Referral Assistant	13.40
Key Entry Operator I	8.63
Key Entry Operator II	10.64
Messenger (Courier)	7.17
Order Clerk I	10.28
Order Clerk II	11.42
Personnel Assistant (Employment) I	10.12
Personnel Assistant (Employment) II	11.36
Personnel Assistant (Employment) III	13.12
Personnel Assistant (Employment) IV	14.60
Production Control Clerk	13.40
Rental Clerk	11.22
Scheduler, Maintenance	11.22
Secretary I	11.22
Secretary II	12.32
Secretary III	13.40
Secretary IV	14.66
Secretary V	16.28
Service Order Dispatcher	11.22
Stenographer I	12.77
Stenographer II	14.31
Supply Technician	14.66
Survey Worker (Interviewer)	12.32
Switchboard Operator-Receptionist	9.26
Test Examiner	12.32
Test Proctor	12.32
Travel Clerk I	8.58
Travel Clerk II	9.42
Travel Clerk III	10.40
Word Processor I	10.54

Word Processor II	12.53
Word Processor III	13.24
Automatic Data Processing Occupations	
Computer Data Librarian	10.58
Computer Operator I	10.58
Computer Operator II	12.17
Computer Operator III	15.66
Computer Operator IV	16.73
Computer Operator V	17.28
Computer Programmer I (1)	14.58
Computer Programmer II (1)	16.86
Computer Programmer III (1)	20.23
Computer Programmer IV (1)	21.19
Computer Systems Analyst I (1)	20.08
Computer Systems Analyst II (1)	22.68
Computer Systems Analyst III (1)	27.62
Peripheral Equipment Operator	10.58
Automotive Service Occupations	
Automotive Body Repairer, Fiberglass	16.58
Automotive Glass Installer	15.42
Automotive Worker	15.42
Electrician, Automotive	16.58
Mobile Equipment Servicer	14.25
Motor Equipment Metal Mechanic	16.58
Motor Equipment Metal Worker	15.42
Motor Vehicle Mechanic	16.58
Motor Vehicle Mechanic Helper	13.66
Motor Vehicle Upholstery Worker	15.42
Motor Vehicle Wrecker	15.42
Painter, Automotive	15.95
Radiator Repair Specialist	15.42
Tire Repairer	13.77
Transmission Repair Specialist	16.58
Food Preparation and Service Occupations	
Baker	9.39
Cook I	8.66
Cook II	9.39
Dishwasher	7.29
Food Service Worker	7.29
Meat Cutter	9.39
Waiter/Waitress	7.65
Furniture Maintenance and Repair Occupations	
Electrostatic Spray Painter	15.95
Furniture Handler	13.31
Furniture Refinisher	15.95
Furniture Refinisher Helper	13.66
Furniture Repairer, Minor	14.81
Upholsterer	15.95
General Services and Support Occupations	
Cleaner, Vehicles	7.29
Elevator Operator	7.29
Gardener	8.66
House Keeping Aid I	6.92
House Keeping Aid II	7.29
Janitor	7.29
Laborer, Grounds Maintenance	7.65
Maid or Houseman	6.92
Pest Controller	9.04
Refuse Collector	7.29
Tractor Operator	8.33
Window Cleaner	7.70
Health Occupations	

Dental Assistant	11.17
Emergency Medical Technician (EMT)/Paramedic/ Ambulance Driver	11.17
Licensed Practical Nurse I	12.12
Licensed Practical Nurse II	13.61
Licensed Practical Nurse III	15.00
Medical Assistant	9.98
Medical Laboratory Technician	9.98
Medical Record Clerk	9.98
Medical Record Technician	13.83
Nursing Assistant I	7.25
Nursing Assistant II	8.15
Nursing Assistant III	8.89
Nursing Assistant IV	9.98
Pharmacy Technician	12.45
Phlebotomist	9.98
Registered Nurse I	16.58
Registered Nurse II	18.72
Registered Nurse II, Specialist	18.72
Registered Nurse III	23.61
Registered Nurse III, Anesthetist	23.61
Registered Nurse IV	25.56
Information and Arts Occupations	
Audiovisual Librarian	17.52
Exhibits Specialist I	16.00
Exhibits Specialist II	19.35
Exhibits Specialist III	20.77
Illustrator I	16.00
Illustrator II	19.35
Illustrator III	20.77
Librarian	16.28
Library Technician	14.06
Photographer I	12.88
Photographer II	16.00
Photographer III	19.35
Photographer IV	20.77
Photographer V	25.12
Laundry, Dry Cleaning, Pressing and Related Occupations	
Assembler	6.35
Counter Attendant	6.35
Dry Cleaner	8.44
Finisher, Flatwork, Machine	6.35
Presser, Hand	6.35
Presser, Machine, Drycleaning	6.35
Presser, Machine, Shirts	6.35
Presser, Machine, Wearing Apparel, Laundry	6.35
Sewing Machine Operator	9.21
Tailor	9.97
Washer, Machine	6.99
Machine Tool Operation and Repair Occupations	
Machine-Tool Operator (Toolroom)	15.95
Tool and Die Maker	19.56
Material Handling and Packing Occupations	
Forklift Operator	12.81
Fuel Distribution System Operator	14.42
Material Coordinator	14.42
Material Expediter	14.42
Material Handling Laborer	11.56
Order Filler	11.90
Production Line Worker (Food Processing)	13.14
Shipping Packer	11.64
Shipping/Receiving Clerk	11.64

Stock Clerk (Shelf Stocker; Store Worker II)	13.38
Store Worker I	11.61
Tools and Parts Attendant	13.31
Warehouse Specialist	13.14
Mechanics and Maintenance and Repair Occupations	
Aircraft Mechanic	16.58
Aircraft Mechanic Helper	13.66
Aircraft Quality Control Inspector	17.12
Aircraft Servicer	14.81
Aircraft Worker	15.42
Appliance Mechanic	15.95
Bicycle Repairer	13.77
Cable Splicer	16.58
Carpenter, Maintenance	15.95
Carpet Layer	15.42
Electrician, Maintenance	17.10
Electronics Technician, Maintenance I	15.42
Electronics Technician, Maintenance II	18.59
Electronics Technician, Maintenance III	19.28
Fabric Worker	14.81
Fire Alarm System Mechanic	16.58
Fire Extinguisher Repairer	14.25
Fuel Distribution System Mechanic	16.58
General Maintenance Worker	15.42
Heating, Refrigeration and Air Conditioning Mechanic	16.58
Heavy Equipment Mechanic	16.58
Heavy Equipment Operator	17.08
Instrument Mechanic	16.58
Laborer	11.25
Locksmith	15.95
Machinery Maintenance Mechanic	16.58
Machinist, Maintenance	16.58
Maintenance Trades Helper	13.66
Millwright	16.58
Office Appliance Repairer	15.95
Painter, Aircraft	15.95
Painter, Maintenance	15.95
Pipefitter, Maintenance	18.00
Plumber, Maintenance	15.95
Pneudraulic Systems Mechanic	16.58
Rigger	16.58
Scale Mechanic	15.42
Sheet-Metal Worker, Maintenance	16.58
Small Engine Mechanic	15.42
Telecommunication Mechanic I	15.42
Telecommunication Mechanic II	17.12
Telephone Lineman	16.58
Welder, Combination, Maintenance	16.58
Well Driller	16.58
Woodcraft Worker	16.58
Woodworker	14.98
Miscellaneous Occupations	
Animal Caretaker	7.98
Carnival Equipment Operator	8.33
Carnival Equipment Repairer	8.66
Carnival Worker	7.29
Cashier	7.20
Desk Clerk	7.17
Embalmer	18.12
Lifeguard	6.40
Mortician	18.12
Park Attendant (Aide)	8.03

Photofinishing Worker (Photo Lab Tech., Darkroom Tech)	6.40
Recreation Specialist	14.42
Recycling Worker	8.33
Sales Clerk	6.40
School Crossing Guard (Crosswalk Attendant)	7.29
Sport Official	6.40
Survey Party Chief (Chief of Party)	10.64
Surveying Aide	5.86
Surveying Technician (Instr. Person/Surveyor Asst./Instr.)	8.95
Swimming Pool Operator	9.39
Vending Machine Attendant	8.33
Vending Machine Repairer	9.39
Vending Machine Repairer Helper	8.33
Personal Needs Occupations	
Child Care Attendant	6.24
Child Care Center Clerk	8.95
Chore Aid	6.92
Homemaker	8.64
Plant and System Operation Occupations	
Boiler Tender	16.58
Sewage Plant Operator	15.95
Stationary Engineer	16.58
Ventilation Equipment Tender	13.66
Water Treatment Plant Operator	15.95
Protective Service Occupations	
Alarm Monitor	11.14
Corrections Officer	15.29
Court Security Officer	15.29
Detention Officer	15.29
Firefighter	14.89
Guard I	7.69
Guard II	11.14
Police Officer	17.06
Stevedoring/Longshoremen Occupations	
Blocker and Bracer	14.81
Hatch Tender	14.81
Line Handler	14.81
Stevedore I	14.26
Stevedore II	15.36
Technical Occupations	
Air Traffic Control Specialist, Center (2)	26.18
Air Traffic Control Specialist, Station (2)	18.35
Air Traffic Control Specialist, Terminal (2)	20.21
Archeological Technician I	13.97
Archeological Technician II	15.64
Archeological Technician III	19.35
Cartographic Technician	19.35
Civil Engineering Technician	19.35
Computer Based Training (CBT) Specialist/ Instructor	20.08
Drafter I	10.54
Drafter II	12.88
Drafter III	16.00
Drafter IV	19.35
Engineering Technician I	12.25
Engineering Technician II	13.78
Engineering Technician III	15.42
Engineering Technician IV	18.68
Engineering Technician V	21.32
Engineering Technician VI	24.00
Environmental Technician	17.52
Flight Simulator/Instructor (Pilot)	22.68
Graphic Artist	20.08

Instructor	20.08	
Laboratory Technician	15.66	
Mathematical Technician	18.68	
Paralegal/Legal Assistant I	13.26	
Paralegal/Legal Assistant II	14.66	
Paralegal/Legal Assistant III	17.93	
Paralegal/Legal Assistant IV	21.69	
Photooptics Technician	18.68	
Technical Writer	21.19	
Unexploded (UXO) Safety Escort	16.02	
Unexploded (UXO) Sweep Personnel	16.02	
Unexploded Ordnance (UXO) Technician I	16.02	
Unexploded Ordnance (UXO) Technician II	20.47	
Unexploded Ordnance (UXO) Technician III	24.53	
Weather Observer, Combined Upper Air and Surface Programs (3)	15.66	
Weather Observer, Senior (3)	17.41	
Weather Observer, Upper Air (3)	15.66	
Transportation/ Mobile Equipment Operation Occupations		
Bus Driver	13.38	
Parking and Lot Attendant	10.80	
Shuttle Bus Driver	12.84	
Taxi Driver	10.05	
Truckdriver, Heavy Truck	15.87	
Truckdriver, Light Truck	12.84	
Truckdriver, Medium Truck	13.38	
Truckdriver, Tractor-Trailer	15.87	

ALL OCCUPATIONS LISTED ABOVE RECEIVE THE FOLLOWING BENEFITS:

HEALTH & WELFARE: \$1.92 an hour or \$76.80 a week or \$332.80 a month.

VACATION: 2 weeks paid vacation after 1 year of service with a contractor or successor; 3 weeks after 8 years, and 4 weeks after 15 years. Length of service includes the whole span of continuous service with the present contractor or successor, wherever employed, and with the predecessor contractors in the performance of similar work at the same Federal facility. (Reg. 29 CFR 4.173)

HOLIDAYS: A minimum of ten paid holidays per year: New Year's Day, Martin Luther King Jr.'s Birthday, Washington's Birthday, Memorial Day, Independence Day, Labor Day, Columbus Day, Veterans' Day, Thanksgiving Day, and Christmas Day. (A contractor may substitute for any of the named holidays another day off with pay in accordance with a plan communicated to the employees involved.) (See 29 CFR 4.174)

THE OCCUPATIONS WHICH HAVE PARENTHESES AFTER THEM RECEIVE THE FOLLOWING BENEFITS (as numbered):

1) Does not apply to employees employed in a bona fide executive, administrative, or professional capacity as defined and delineated in 29 CFR 541. (See CFR 4.156)

2) **APPLICABLE TO AIR TRAFFIC CONTROLLERS ONLY - NIGHT DIFFERENTIAL:** An employee is entitled to pay for all work performed between the hours of 6:00 P.M. and 6:00 A.M. at the rate of basic pay plus a night pay differential amounting to 10 percent of the rate of basic pay.

3) **WEATHER OBSERVERS - NIGHT PAY & SUNDAY PAY:** If you work at night as part of a regular tour of duty, you will earn a night differential and receive an additional 10% of basic pay for any hours worked between 6pm and 6am. If you are a full-time employed (40 hours a week) and Sunday is part of your regularly scheduled workweek, you are paid at your rate of basic pay plus a Sunday premium of 25% of your basic rate for each hour of Sunday work which is not overtime (i.e. occasional work on Sunday outside the normal tour of duty is considered overtime work).

HAZARDOUS PAY DIFFERENTIAL: An 8 percent differential is applicable to employees employed in a position that represents a high degree of hazard including working with or in close proximity to explosives and incendiary materials involved in research, testing, manufacturing, inspection, renovation, maintenance, and disposal. Such as: Screening, blending, dying, mixing, and pressing of sensitive explosives pyrotechnic compositions such as lead azide, black powder and photoflash power. All dry-house activities involving propellants or explosives. Demilitarization, modification, renovation, demolition, and maintenance operations on sensitive explosives and incendiary materials. All operations involving regarding and cleaning of artillery ranges. A 4 percent differential is applicable to employees employed in a position that represents a low degree of hazard. Including working with or in close proximity to explosives and incendiary materials which involves potential injury such as laceration of hands, face, or arms of the employee engaged in the operation and, possibly adjacent employees, irritation of the skin, minor burns and the like; minimal damage to immediate or adjacent work area or equipment being used. All

operations involving, unloading, storage, and hauling of explosive and incendiary ordnance material other than small arms ammunition. (Distribution of raw nitroglycerine is covered under high degree hazard.)

**** UNIFORM ALLOWANCE ****

If employees are required to wear uniforms in the performance of this contract (either by the terms of the Government contract, by the employer, by the state or local law, etc.), the cost of furnishing such uniforms and maintaining (by laundering or dry cleaning) such uniforms is an expense that may not be borne by an employee where such cost reduces the hourly rate below that required by the wage determination. The Department of Labor will accept payment in accordance with the following standards as compliance: The contractor or subcontractor is required to furnish all employees with an adequate number of uniforms without cost or to reimburse employees for the actual cost of the uniforms. In addition, where uniform cleaning and maintenance is made the responsibility of the employee, all contractors and subcontractors subject to this wage determination shall (in the absence of a bona fide collective bargaining agreement providing for a different amount, or the furnishing of contrary affirmative proof as to the actual cost), reimburse all employees for such cleaning and maintenance at a rate of \$3.35 per week (or \$.67 cents per day). However, in those instances where the uniforms furnished are made of "wash and wear" materials, may be routinely washed and dried with other personal garments, and do not require any special treatment such as dry cleaning, daily washing, or commercial laundering in order to meet the cleanliness or appearance standards set by the terms of the Government contract, by the contractor, by law, or by the nature of the work, there is no requirement that employees be reimbursed for uniform maintenance costs.

**** NOTES APPLYING TO THIS WAGE DETERMINATION ****

Source of Occupational Title and Descriptions:

The duties of employees under job titles listed are those described in the "Service Contract Act Directory of Occupations," Fourth Edition, January 1993, as amended by the Third Supplement, dated March 1997, unless otherwise indicated. This publication may be obtained from the Superintendent of Documents, at 202-783-3238, or by writing to the Superintendent of Documents, U.S. Government Printing Office, Washington, D.C. 20402. Copies of specific job descriptions may also be obtained from the appropriate contracting officer.

REQUEST FOR AUTHORIZATION OF ADDITIONAL CLASSIFICATION AND WAGE RATE {Standard Form 1444 (SF 1444)}

Conformance Process:

The contracting officer shall require that any class of service employee which is not listed herein and which is to be employed under the contract (i.e., the work to be performed is not performed by any classification listed in the wage determination), be classified by the contractor so as to provide a reasonable relationship (i.e., appropriate level of skill comparison) between such unlisted classifications and the classifications listed in the wage determination. Such conformed classes of employees shall be paid the monetary wages and furnished the fringe benefits as are determined. Such conforming process shall be initiated by the contractor prior to the performance of contract work by such unlisted class(es) of employees. The conformed classification, wage rate, and/or fringe benefits shall be retroactive to the commencement date of the contract. {See Section 4.6 (C)(vi)} When multiple wage determinations are included in a contract, a separate SF 1444 should be prepared for each wage determination to which a class(es) is to be conformed.

The process for preparing a conformance request is as follows:

- 1) When preparing the bid, the contractor identifies the need for a conformed occupation(s) and computes a proposed rate(s).
- 2) After contract award, the contractor prepares a written report listing in order proposed classification title(s), a Federal grade equivalency (FGE) for each proposed classification(s), job description(s), and rationale for proposed wage rate(s), including information regarding the agreement or disagreement of the authorized representative of the employees involved, or where there is no authorized representative, the employees themselves. This report should be submitted to the contracting officer no later than 30 days after such unlisted class(es) of employees performs any contract work.
- 3) The contracting officer reviews the proposed action and promptly submits a report of the action, together with the agency's recommendations and pertinent information including the position of the contractor and the employees, to the Wage and Hour Division, Employment Standards Administration, U.S. Department of Labor, for review. (See section 4.6(b)(2) of Regulations 29 CFR Part 4).
- 4) Within 30 days of receipt, the Wage and Hour Division approves, modifies, or disapproves the action via transmittal to the agency contracting officer, or notifies the contracting officer that additional time will be required to process the request.
- 5) The contracting officer transmits the Wage and Hour decision to the contractor.
- 6) The contractor informs the affected employees. Information required by the Regulations must be submitted on SF 1444 or bond paper. When preparing a conformance request, the "Service Contract Act Directory of Occupations" (the Directory) should be used to compare job definitions to insure that duties requested are not performed by a classification already listed in the wage determination. Remember, it is not the job title, but the required tasks that

determine whether a class is included in an established wage determination. Conformances may not be used to artificially split, combine, or subdivide classifications listed in the wage determination.

Department of the Navy

NAVMED P-117
CHANGE 107

Subj: Off-duty Remunerative Professional
Employment (Regulatory)

1. General. Off-duty remunerative professional civilian employment, including self-employment (hereto referred to as off-duty employment) of active duty Medical Department officers is subject to policies herein stated by the chief, Bureau of Medicine and Surgery, and policies applicable to all members of the naval service as stated by the Secretary of the Navy (SECNAVINST 5370.2 series) and the Chief of Naval Personnel (BUPERSMAN 34205000). No Medical Department officers on active duty shall engage in any off-duty employment without first obtaining the permission of the commanding officer.

2. Guideline

a. Medical Department officers on active duty are in a 24-hour duty status and their military duty takes precedence on their time, talents, and attention.

b. Permission for an officer to engage in off-duty employment shall be based on a determination by the commanding officer that the permission requested is consistent with these guidelines and that the proposed employment will not interfere with the officer's military duties. If approved, employment will normally not exceed 16 hours per week. Periods in excess of 16 hours per week can be authorized only if the commanding officer finds that special circumstances exist which indicate that no conflict with military duties will occur, notwithstanding the addition hours. Permission to engage in off-duty employment maybe withdrawn at any time.

c. A Medical Department officer in off-duty employment shall not assume primary responsibility for the care of any critically ill person on a continuing basis as this will inevitably result in compromise of responsibilities to the patient or the primacy of military obligations.

d. Medical Department officer trainees are prohibited from off-duty employment. Other Medical Department officers are discouraged from off-duty employment. No officer shall request or be granted administrative absence for the primary purpose of conducting off-duty employment.

e. Off-duty employment shall not be conducted on military premises, involve expense to the Federal government, nor involve use of military equipment, personnel, or supplies. Military personnel may not be employed by Medical Department officers involved in off-duty employment.

f. Off-duty employment shall not interfere, nor be in competition, with local civilian practitioners in the health professions and must be carried out in compliance with all applicable licensing requirements. To ensure this, a statement shall be provided from the appropriate local professional association indicating that there is a need for the individual's service in the community. Local licensing requirements are the responsibility of officers wishing to engage in private practice. Those engaging in private practice are subject to all requirements of the Federal narcotic law, including registration and payment of tax.

g. There may be no self-referral from the military setting to their off-duty employment on the part of military Medical Department officers.

h. No Medical Department officer on active duty in off-duty employment may solicit or accept a fee directly or indirectly for the care of a member, retired member, or dependent of such members of the uniformed services as are entitled to medical or dental care by those services. Indirect acceptance shall be interpreted to include those fees collected by an emergency room or walk-in clinic staffed by a military medical officer. Entitled members must be screened and identified as such by the facility and their charges reduced to reflect that portion of the charges which are accounted for by the military medical officer's services. Nor may such a fee be accepted directly or indirectly for the care of Department of Veterans Affairs beneficiaries.

i. The Assistant Secretary of Defense (Health Affairs) has decreed that it will be presumed that a conflict of interest exists and, hence, CHAMPUS payments will be disallowed in any claim of a CHAMPUS provider who employs an active duty military member or civilian employee. The only two exceptions are:

(1) Indirect payments to private organizations to which physicians of the National Health Service Corps (NHSC) are assigned (but direct payments to the NHSC physician would still be prohibited).

(2) Payments to a hospital employing Government medical personnel in an emergency room provided the medical care was not furnished directly by the Government personnel.

j. Subsidiary obligations arising out of off-duty employment, such as appearances in court or testimony before a compensation board, which take place during normal working hours, shall be accomplished only while on annual leave.

k. These guidelines do not apply to the provision of emergency medical assistance in isolated instances. Also excluded are nonremunerative community services operated by nonprofit organizations for the benefit of all the community and deprived persons, such as a drug abuse program, program volunteer, venereal disease centers, and family planning centers.

l. Medical Department officers are expected to be aware of and comply with all other statutes and regulations pertaining to off-duty employment. Where doubt exists as to whether all applicable constraints have been considered, consultation should be effected with the local naval legal service office.

3. The local command has primary responsibility for control of off-duty employment by Medical Department officers. Guidelines above serve as a basis for carrying out this responsibility.

4. Medical Department officers requesting permission to engage in off-duty employment shall submit their request to the commanding officer on NAVMED 1610/1, Off-duty Remunerative Professional civilian Employment Request, and shall sign the Statement of Affirmation thereon in the commanding officer's presence or designee. Approval or disapproval by the commanding officer shall be indicated in the appropriate section of NAVMED 1610/1. Medical Department officers shall advise their off-duty employers that as military members they are required to respond immediately to calls for military duty that may arise during scheduled off-duty employment. The commanding officer's approval of an officer's request for off-duty employment may not be granted without written certification from the off-duty employer that he or she accepts the availability limitations placed on the Medical Department officer.

5. The requester shall inform the commanding officer in writing of any deviation in the stated request prior to the inception of any such changes.

6. Permission shall be withdrawn at any time by the commanding officer when such employment is determined to be inconsistent with the above guidelines. Where permission is withdrawn the officer affected shall be afforded and opportunity to submit to the commanding officer a written statement containing the Medical Department officer's views or any information pertinent to the discontinuance of the employment.

7. Reports are not required to be submitted to BUMED by field activities. However, during Medical and Dental Inspectors General visits or other administrative onsite visits, local command compliance with this article will be reviewed. In addition, adequate records should be maintained to provide summarized information as may be necessary for monitoring and evaluating the functioning of this program by BUMED or higher authority.

VOLUME II: MANAGEMENT PLAN

A. Management

1. Identify the personnel, by name and title, responsible for overall contract management.

Response:

2. State the personnel in your organization, by name and title, that will be responsible for preparing the proposals in response to the minimum and maximum task orders.

Minimum Task Orders:

Maximum Task Orders:

3. Describe the steps that will take place by the personnel listed in question 2 above to start task order services.

Response:

4. Identify the personnel, by name and title, who will be directly responsible for the contractor staff working in the MTF. State where the identified personnel will be physically located.

Response:

5. State the steps taken to track expiring licenses and certifications to ensure that they are kept current and that the Government has the latest versions.

Response:

B. Recruiting

1. State the steps that will be taken to recruit personnel to perform services in the locations identified in Section B.

Response:

2. State the marketing techniques you use to attract personnel for task orders.

Response:

3. State the steps taken to maintain a roster of potential candidates (i.e. back up personnel) for replacing contract health care workers?

Response:

4. Identify the personnel, by name and title, responsible for staff scheduling and substitution. State the steps taken for personnel substitution to ensure fulfillment of staffing requirements during planned and unplanned absences.

Response:

5. State the steps taken for the credentials compilation and verification process.

Response:

C. Retention

1. State how you reward health care workers for employment longevity or superior performance.

Response:

2. State the steps taken to determine if your wage is competitive in the local employment market.

Response:

D. Employee Relations

1. State the personnel, by name and title, responsible for human resource issues. State the steps taken to ensure availability of your corporate representatives for contract health care workers to resolve problems such as payroll, benefits, etc?

Response:

2. State your corporate policy regarding progress reviews and/or periodic employee evaluations.

Response:

E. Benefits

Indicate the benefits provided to contract personnel. If the answer is “yes”, please respond in the appropriate column. If the answer is “no”, please respond to the question with “N/A”. Each column shall contain a response.

Benefit	Part-Time (PT) Employee	Full-Time (FT) Employee	If “yes”, Dollar Amount or Percentage contributed
Do you offer the following benefits?			
1. Retirement			
2. Group Health Insurance			
3. Dental Insurance			
4. Uniform Allowance			
5. Continuing Education			
6. If a 125 Pre-tax medical spending account is available, please indicate optional benefits included?			

<input type="checkbox"/> Medical or medical-related premium benefit	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	N/A
<input type="checkbox"/> Medical or medical-related expense reimbursement benefit	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	N/A
<input type="checkbox"/> Dependent care expense reimbursement benefit (childcare or eldercare expenses)	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	N/A
<input type="checkbox"/> Term life insurance premium	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	N/A
<input type="checkbox"/> Disability insurance premium	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	N/A
<input type="checkbox"/> Other Benefits: Identify any other benefits provided and the amount you contribute.	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
7. Do you allow personnel to decline all or some benefits in exchange for an increase in direct compensation?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	

F. Notional Task Orders

Future task orders, such as those in the Notional Task Orders, may be of short duration or have only a limited time for start up. Provide your assessment of the risks posed by/associated with these circumstances and the steps you will take to mitigate the circumstances.

Response:

ATTACHMENT XIII - SECTION L, PAST PERFORMANCE TABLE

PAST PERFORMANCE TABLE

Contract Number	Description of Services & explain how its directly related and/or similar or relevant to this SOW	Number & type of health care workers	Location of Services	Dates of Services Provided	Name, organization, address & telephone number of a verified POC at the federal, state, local government or commercial entity for which the contract services were performed.

Describe any noteworthy successes, accomplishments, awards or commendations achieved during the described experience in providing services, and any other information the offeror considers relevant to its corporate experience. The Government will accept no more than one single spaced page.

Response:

NAVAL MEDICAL LOGISTICS COMMAND
FT. DETRICK, MD 21702-9203

N62645-00-R-0017

ATTACHMENT XIV - OFFEROR'S MANAGEMENT PLAN AWARD

To be incorporated at time of award.

NAVAL MEDICAL LOGISTICS COMMAND
FT. DETRICK, MD 21702-9203

N62645-00-R-0017

ATTACHMENT XV – CONTRACT ADMINISTRATION PLAN

TO BE PROVIDED BY AMENDMENT.

ATTACHMENT XVI - CURRENT CONTRACTS – TO BE REPLACED BY MINIMUM LOTS OF
THIS SOLICITATION

Lot 1: Replaces non-personal services contract N00140-97-C-L205 for the RN labor category. This contract currently costs \$54,523.00 per month. This contract does not specifically state labor categories or hourly rates paid to the health care workers and/or administrative personnel. . This contract was awarded to PhyAmerica Government Services, Inc. There is no current contract for a Nurse Practitioner.

Lot 2: Replaces non-personal services contract N00140-97-C-L205 for LPNs and Mas. This contract was awarded to PhyAmerica Government Services, Inc. The cost for these two labor categories is included in the monthly rate and does not distinguish the hourly rate paid to the health care workers. This lot also replaces a task order issued off of the Bethesda Ancillary MATO (N62645-01-D-5006) for MAs effective 1 Oct 00 through 31 Mar 01. The MA task order was issued to PHRI at a cost of \$19.50 PH (due to short lead time). There is no current contract for the Psychiatric Technician.